UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 7
11201 Renner Boulevard
Lenexa, Kansas 66219

MEMORANDUM TO FILE

SUBJECT: Facility Response Plan Inspection
Magellan Midstream Partners, L.P. St. Joseph (Wathena) Terminal
Wathena, Kansas

FROM: Eric Nold, On-Scene Coordinator
Superfund Division/Emergency Response South Branch/Planning and Preparedness South Section

TO: Facility Response Plan File (FRP07A023)
Technical Resource Room, 1.A-D06

On July 21, 2014, a Facility Response Plan (FRP) Inspection was conducted at the Magellan St. Joseph Terminal, Wathena, Kansas. The purpose of the inspection was to confirm that the FRP is appropriate and being properly implemented which it was found to be. The plan review was determined to be in full compliance with only minor suggestions for improving the plan which was relayed to Magellan in a series of e-mails from Paul Doherty. The date the facility was notified of these findinga can be found in Attachment 8. Please refer to the enclosed report for details and documentation indicating the status of the facility.

The following is included in this Memorandum to File:

- Copy of Inspection Checklist
- Figures
- Photo log
- Confidential Business Information Claim Form and Receipt of Documents Form
- Copy of facility contacts
- Facility Training and Exercise Documentation
- ISIS Form
- Copy of inspection letter sent to Magellan

Attachments

Attachment 1

Inspection Checklist

U.S. EPA Facility Response Plan (FRP) -- Review Form

I. Facility Information

FRP Number: FRP07A0023	Facility Name: St. Joseph Terminal	
Facility Owner: Magellan LLP		
Facility Operator (if different from owner):		
Mailing Address: 963 Vermont Road		
City: Wathena	State: KS	Zip: 66090
Telephone: (785)989-3448	Fax: (785)989-4977	
Latitude: 39°45'05"N	Longitude: -94°55'41"W	
Other Description or Directions: Approximately one mile east of Wathena, KS on HWY 36.		
Site Location Map Attached (Y/N) :		

II. Facility Overview

Date of Initial Facility Operation:	1969	
Total Storage Capacity (bbls/gals):	3,618,627 gals	# Of Tanks: 8
Worst Case Discharge (bbls/gals):	55,283	
Actual Worst Case Discharge (barrels) calculated from Worst Case Discharge Worksheet	55,283	
Actual Worst Case Discharge (gallons) calculated from Worst Case Discharge Worksheet	2,321,890	
Capacity of Largest Above Ground Storage Tank (bbls/gals): 2,321,890 gals		
Name of Affected Waterway(s)/Protected Waterway(s)/Environmentally Sensitive Area (A): Missouri River		
Distance from Facility:		
Resposne Contractor(s):		

Yes	No	
☑	☐	Standard Response Plan Cover Sheet Submitted with Plan.
☑	☐	Emergency Response Action Plan Submitted with Plan or as Separate Part of Plan.
☑	☐	Facility Response Plan Follows 40 CFR 112 Appendix F Format.

III. FRP Applicability [40 CFR 112.20 (f)(1)]

☐	The facility transfers oil over water to or from vessels and has a total oil storage capacity greater or equal to 42,000 gallons.
	-OR-
	The facility's total oil storage is greater than or equal to 1 million gallons, and one of the following is true:
☐	The facility does not have secondary containment for each aboveground storage area sufficienty large to contain the capacity of the largest aboveground oil storage tank within each storage area plus sufficient freeboard to allow for precipitation.
☑	The facility is located at a distance such that a discharge from the facility could cause injury to fish and wildlife and sensitive environments.
☑	The facility is located at a distance such that a discharge from the facility would shut down a public drinking water intake.
☐	The facility has had a reportable spill in an amount greater than or equal to 10,000 gallons with in the last 5 years.

☐ Substantial Harm Facility		☑	Significant and Substantial Harm Facility
Reviewed by:	Eric Nold	Date:	5/14/2014
FRP Status:		Date:	
Approved by:		Date:	

NOTE: The following checklist items correspond to the final regulations as outlined in 40 CFR 112.20, Appendix F. For all checklist items, indicate FRP adequacy as follows: adequately addressed (YES), deficient or not addressed (NO), or not applicable (N/A)

Facility Response Plan
Plan Review Checklist
For Verifying Compliance with Facility Response Plan Requirements

Activity Information	
Activity Type	FRP Plan Review
Reason for Review	☐ Initial Plan Submittal (new FRP) ☑ 5-year Review ☐ Plan Amendment (note type) ☐ Other (note other reason) Note:
Activity Date	
EPA Inspector	

112.20(h)(11)	A. Response Plan Cover Sheet (sec. 2.0)	YES	NO	N/A
	General Information (sec 2.1)			
	Facility name	☑	☐	☐
	Facility address	☑	☐	☐
	Facility telephone number	☑	☐	☐
	Mailing address (if different from facility address)	☑	☐	☐
	Facility owner/operator and address **(recommended)**	☑	☐	☐
	Facility owner telephone **(recommended)**	☑	☐	☐
	Dun & Bradstreet number	☑	☐	☐
	Longitude (degrees, minutes, seconds)	☑	☐	☐
	Latitude (degree, minutes, seconds)	☑	☐	☐
	North American Industrial Classification System (NAICS) code	☑	☐	☐
	Facility start up date **(recommended)**	☐	☐	☑
	Facility acres **(recommended)**	☐	☐	☑
	Name of protected waterway or environmentally sensitive area	☐	☐	☑
	Distance to navigable water	☑	☐	☐
	Worst case discharge amount (gallons)	☑	☐	☐
	Maximum oil storage capacity (gallons)	☑	☐	☐
	Largest aboveground storage tank (AST) capacity (gallons)	☑	☐	☐
	Total number of ASTs	☑	☐	☐
	Total number of underground storage tanks (USTs)	☑	☐	☐
	Total UST storage	☑	☐	☐
	Total storage of drums and transformers that contain oil	☐	☐	☑
	Number of surface impoundments and total storage of surface	☑	☐	☐

	Applicability of Substantial Harm Criteria (sec.2.2)			
	Attachment C-1 with answer to each applicability question	☑	☐	☐
	Documentation of reliability and analytical soundness of alternate formula	☐	☐	☑
Please use the following space to note any missing or incomplete information.				
	Certification (sec. 2.3)			
	Plan holder certification is included (contains signature, title, and date)	☑	☐	☐
Please use the following space to note any missing or incomplete information.				
	Verification of Contract (sec. 2.4)			
	Plan holder certification is included (contains signature, title, and date)	☐	☐	☑
Please use the following space to note any missing or incomplete information.				

112.20(h)(1)	**B. Emergency Response Action Plan (ERAP) (sec. 1.1)**	YES	NO	N/A
112.20(h)(1)	Separate Section of FRP	☑	☐	☐
112,20(h)(1)(i),	Qualified Individual (QI) Information (sec. 1.2)	☑	☐	☐
112,20(h)(1)(ii), 112.20(h)(3)(iii)	Emergency Notification List (sec. 1.3.1)	☑	☐	☐
	Spill Response Notification Form (sec. 1.3.1)	☑	☐	☐
112.20(h)(1)(iv)	Response Equipment List and Location (sec. 1.3.2)	☑	☐	☐
112.20(h)(1)(iv)	Response Equipment Testing and Deployment (sec. 1.3.4)	☑	☐	☐
112.20(h)(1)(v)	Facility Response Team List (sec. 1.3.4)	☑	☐	☐
112.20(h)(1)(vi)	Evacuation Plan (sec. 1.3.5)	☑	☐	☐
112.20(h)(1)(vii)	Immediate Actions (sec. 1.7.1)	☑	☐	☐
112.20(h)(1)(viii)	Facility Diagrams (sec. 1.9)	☑	☐	☐
	*The sections above should be extracted from the more detailed corresponding sections of the plan.			
Please use the following space to note any missing or incomplete information in the ERAP.				

112.20(h)(2)	C. Facility Information (sec. 1.2)	YES	NO	N/A
	Facility name (sec. 1.2.1)	☑	☐	☐
	Street address	☑	☐	☐
	City, state, zip code	☑	☐	☐
	County	☑	☐	☐
	Phone number	☑	☐	☐
	Latitude/longitude (sec. 1.2.2)	☑	☐	☐
	Wellhead protection area (sec. 1.2.3)	☑	☐	☐
	Owner/operator (both names included, if different) (sec. 1.2.4)	☑	☐	☐
	QI Information (sec. 1.2.5)	☑	☐	☐
	-Name, position, street address, phone numbers	☑	☐	☐
	- Description of specific response training experience	☑	☐	☐
	Oil storage start-up date (sec. 1.2.6)	☑	☐	☐
	Facility operations description (sec. 1.2.7)	☑	☐	☐
	North American Industrial Classification System (NAICS) or Standard Industrial Classification code (SIC)	☑	☐	☐
	Dates and types of substantial expansion (sec. 1.2.8)	☐	☐	☑
Please use the following space to note any missing or incomplete information in Section 1.2 of the Plan and, to the exten possible, assess the accuracy of the information provided based on field inspection.				

112.20(h)(1) and (3)	D. Emergency Response Information (sec. 1.3)	YES	NO	N/A
	Notification (sec. 1.3.1)			
	Emergency Notification Phone List	☑	☐	☐
	National Response Center phone number	☑	☐	☐
112.20(h)(1)(i)	QI (day and evening) phone numbers	☑	☐	☐
	Company response team (day and evening) phone numbers	☑	☐	☐
	Federal On-Scene Coordinator (OSC) and/or Regional Response Center (day and evening) phone numbers	☑	☐	☐
	Local response team phone numbers (fire department/cooperatives)	☑	☐	☐
	Fire marshal (day and evening) phone numbers	☑	☐	☐
	State emergency response phone number(s)	☑	☐	☐
	State Police phone number	☑	☐	☐
	State Emergency Response Commission (SERC) phone number	☑	☐	☐
	Local emergency planning committee (LEPC) phone number	☑	☐	☐
	Wastewater treatment facility(s) name and phone number **(recommended)**	☐	☐	☑
	Local water supply system (day and evening) phone numbers	☑	☐	☐

	Weather report phone number	☑	☐	☐
	Local television/radio phone number(s) for evacuation notification	☑	☐	☐
112.20(h)(3)(i)	Spill response contractor(s)	☑	☐	☐
	Factories/Utilities with water intakes **(recommended)**	☑	☐	☐
	Trustees of sensitive areas **(recommended)**	☑	☐	☐
	Hospital phone number	☑	☐	☐
	Spill Response Notification Form			
	Reporter's name, position and phone number	☑	☐	☐
	Company information	☑	☐	☐
	Incident description (source/cause)	☑	☐	☐
	Material (were materials discharged?)	☑	☐	☐
	Response action (meeting federal obligations to report, calling for responsible party, time called)	☑	☐	☐
	Impact			
	Date/time of incident, incident address/location, nearest city/state/county/zip code, distance from city/units of measure/direction from city, township, range, borough, container type/tank oil storage capacity	☑	☐	☐
	Units of measure, facility oil storage capacity/units of measure, facility longitude and latitude	☑	☐	☐
Please use the following space to note any missing or incomplete information in Section 1.3 of the Plan. Please use to assess the accuracy of the information provided based on field inspection.				
112.20(h)(1)(iv), 112.20(h)(3)(vi)	**Response Equipment (sec 1.3.2)**			
	Equipment Information			
	Equipment list	☑	☐	☐
	Equipment location	☑	☐	☐
	Release handling capabilities and limitations (e.g., launching sites)	☑	☐	☐
Please use the following space to note any missing or incomplete information.				

112.20(h)(3)(vi)	**E. Response Equipment List (Identify if Facility, OSRO, CO-OP owned by letters O, F, or C) (sec. 1.3.2)**	YES	NO	N/A
O	Skimmers/pumps (operational status, type/model/year, number or quantity capacity, daily effective recovery rate, storage location)	☑	☐	☐
F	Boom (containment boom: operational status, year, number, skirt size)	☑	☐	☐
F	Boom (sorbent boom: operational status, type/model/year, number, size (length))	☑	☐	☐
	Chemical countermeasure agents stored	☐	☐	☑
F	Sorbents (type, year purchased, amount, storage location)	☑	☐	☐
F	Hand tools (type, quantity, storage location)	☑	☐	☐
	Communications equipment (operational status, type and year, quantity, storage location)	☑	☐	☐
	Fire Fighting and Personnel Protective Equipment	☑	☐	☐
	Boats and Motors (operational status, type, and year, quantity, storage location)	☐	☐	☑
F	Other (e.g., heavy equipment, cranes, dozers, etc.) (operational status, type and year, quantity, storage location)	☑	☐	☐
F	Equipment Location	☑	☐	☐
	Amount of oil that emergency response equipment can handle and limitations (e.g., launching sites) must be described.	☑	☐	☐
Please use the following space to note any missing or incomplete information. **I could not find any details of what PPE was on site and where it was located.**				

112.20(h)(8)(i) and (ii)	**F. Response Equipment Testing and Deployment Drill Log (sec. 1.3.3)**	YES	NO	N/A
	Date of last inspection or equipment test	☑	☐	☐
	Inspection Frequency	☑	☐	☐
	Date of Last Deployment	☑	☐	☐
	Deployment Frequency	☑	☐	☐
	OSRO Certification (Note: Facilities without facility owned response equipment must ensure that the Oil Spill Removal Organization that is identified in the response plan to provide this response equipment certifies that the deployment exercises have been met)	☑	☐	☐
Please use the following space to note any missing or incomplete information in Section 1.3.3 of the Plan and verify that the log information is up-to-date during the field inspection.				

	G. Personnel (sec. 1.3.4)	YES	NO	N/A
112.20(h)(3)(v), 112.20(h)(1)(v)	**Emergency Response Personnel Information**(Personnel whose duties involve responding to emergencies, including oil discharges, even when they are not present at the site)			
	Response personnel name(s)	☑	☐	☐
	Facility response team title/position	☑	☐	☐
	Response personnel phone numbers (work/home, other)	☑	☐	☐
	Response personnel response time	☑	☐	☐
	Response personnel responsibility	☑	☐	☐
	Response personnel training (type and date)	☑	☐	☐
112.20(h)(3)(i)	**Emergency Response Contractor Information**	☐	☐	☐
	Response contractor name (s)	☑	☐	☐
	Response contractor phone numbers	☑	☐	☐
	Response contractor response time	☑	☐	☐
112.20(h)(3)(ii)	Response contractor evidence of contractual arrangements	☑	☐	☐
	Facility Response Team Information(Composed of Emergency Response Personnel and Emergency Response that will respond immediately)			
	Response team member name(s)	☑	☐	☐
	Response team member job function	☑	☐	☐
	Response team member response time	☑	☐	☐
	Response team member phone/pager number	☑	☐	☐
	Name of emergency response contractor (contractors providing facility response team services may be different than contractors providing oil spill response services)	☐	☐	☑
	- Response time	☑	☐	☐
	- Phone/pager	☑	☐	☐
Please use the following space to note any missing or incomplete information in Section 1.3.4 of the Plan **Response time for Bay West cannot be 0 hours from St. Paul, MN. Also, ACME can't get from Tulsa, OK to Wathena, KS in 3.5 hours.**				

112.20(h)(1)(vi), 112.20(h)(3)(vii)	H. Evacuation Plans (sec. 1.3.5)	YES	NO	N/A
	Facility Evacuation Plan (sec. 1.3.5.1)			
	Location of stored materials	☑	☐	☐
	Hazard imposed by spilled materials	☑	☐	☐
	Spill flow direction	☑	☐	☐
	Prevailing wind directions and speed	☑	☐	☐
	Water currents, tides, or wave conditions (if applicable)	☑	☐	☐
	Arrival route of emergency response personnel and response equipment	☑	☐	☐
	Evacuation routes	☑	☐	☐
	Alternative routes of evacuation	☐	☑	☐

	Transportation of injured personnel to nearest emergency medical facility	☑	☐	☐
	Location of alarm/notification systems	☐	☑	☐
	Centralized check-in area for roll call	☑	☐	☐
	Mitigation command center location	☑	☐	☐
	Location of shelter at facility	☑	☐	☐
112.20(h)(3)(vii), 112.20(h)(1)(vi)	Community Evacuation Plans referenced (sec. 1.3.5.3)	☑	☐	☐

Please use the following space to note any missing or incomplete information in Section 1.3.5 of the plan and to assess the accuracy of the information provided based on field inspection**An alternative evacuation route to the rear of the facility should be considered in case the front gate can't be used. Location of air horn not described in plan.**

112.20(h)(3)(ix)	**I. Qualified Individual's Duties (sec. 1.3.6)**	YES	NO	N/A
112.20(h)(3)(ix)(A)	Activate internal alarms and hazard communication systems	☑	☐	☐
112.20(h)(3)(ix)(B)	Notify Response Personnel	☑	☐	☐
112.20(h)(3)(ix)(C)	Identify character, exact source, amount, and extent of the release	☑	☐	☐
112.20(h)(3)(ix)(D)	Notify and provide information to appropriate Federal, State and local authorities	☑	☐	☐
112.20(h)(3)(ix)(E)	Assess interaction of spilled substance with water and/or other substances stored at facility and notify on-scene response personnel of assessment	☑	☐	☐
112.20(h)(3)(ix)(F)	Assess possible hazards to human health and the environment	☑	☐	☐
112.20(h)(3)(ix)(G)	Assess and implement prompt removal actions	☑	☐	☐
112.20(h)(3)(ix)(H)	Coordinate rescue and response actions	☑	☐	☐
112.20(h)(3)(ix)(I)	Access company funding to initiate cleanup activities	☑	☐	☐
112.20(h)(3)(ix)(J)	Direct cleanup activities	☑	☐	☐

Please use the following space to note any missing or incomplete information.

112.20(h)(4)	**J. Hazard Evaluation (sec. 1.4)** *(See Section II, Appendix A)*	YES	NO	N/A
	Hazard Identification (sec. 1.4.1)			
	Tank Above Ground and Below Ground			
	Tanks (List Tanks by Number, Product and Shell Capacity in the space below)			
	Tank number(s)	☑	☐	☐
	Substance(s) stored	☑	☐	☐
	Quantity(s) stored	☑	☐	☐
	Tank type(s)/year(s) of construction	☑	☐	☐
	Shell capacity(s)	☑	☐	☐
	Failure(s)/cause(s)	☑	☐	☐

	Surface Impoundments (SI)			
	SI Number(s)	☐	☐	☑
	Substance(s) Stored	☐	☐	☑
	Quantity(s) Stored	☐	☐	☑
	Surface area(s)/year(s) of construction	☐	☐	☑
	Maximum capacity(s)	☐	☐	☑
	Failure(s)/cause(s)	☐	☐	☑
	Labeled schematic drawing	☐	☐	☑
	Description of transfers (loading and unloading) and volume of material	☐	☐	☑
	Description of daily operations	☐	☐	☑
	Secondary containment volume(s)	☐	☐	☑
	Normal daily throughput of the facility	☐	☐	☑
Please use the following space to note any missing or incomplete information in Section 1.4.1 of the plan and to assess the accuracy of the information in Section 1.4.1 of the plan and to assess the accuracy of the information based on field inspection. Not all tank construction year provided.				

112.20(h)(4)	**K. Vulnerability Analysis (sec. 1.4.2)**(See Appendix A - Calculation of the Planning Distance)	YES	NO	N/A
	Analysis of potential effects of an oil spill on vulnerable areas. (Attachment C-III to Appendix C to this part provides a method that owners or operators shall use to determine appropriate distances from the facility to fish and wildlife and sensitive environments. Owners or operators can use a comparable formula that is considered acceptable by the Regional Administrator (RA). If a comparable formula is used, documentation of the reliability and analytical soundness of the formula must be attached to the Response Plan Cover Sheet.)			
	Water intakes (drinking, cooling or other)	☑	☐	☐
	Schools	☐	☐	☑
	Medical facilities	☐	☐	☑
	Residential areas	☑	☐	☐
	Businesses	☑	☐	☐
	Wetlands or other sensitive environments	☑	☐	☐
	Fish and wildlife	☑	☐	☐
	Lakes and streams	☑	☐	☐
	Endangered flora and fauna	☑	☐	☐
	Recreational areas	☑	☐	☐
	Transportation routes (air, land, and water)	☑	☐	☐
	Utilities	☑	☐	☐
	Other applicable areas of economic importance (list below)	☑	☐	☐
Please use the following space to note any missing or incomplete information in Section 1.4.2 of the plan and to assess the accuracy of the information based on field inspection.				

112.20(h)(4)	**L. Analysis of the Potential for an Oil Spill (sec. 1.4.3)**	YES	NO	N/A
	Description of likelihood of release occurring	☑	☐	☐
	Oil spill history for the life of the facility	☑	☐	☐
	Horizontal range of potential spill	☑	☐	☐
	Vulnerability to natural disaster	☑	☐	☐
	Tank age	☑	☐	☐
	Other factors (e.g., unstable soils, earthquake zones, Karst topography, etc.)	☐	☐	☑
Please use the following space to note any missing or incomplete information in Section 1.4.3 of the Plan and to assess the accuracy of the information based on field inspection.				

112.20(h)(4)	**M. Facility Reportable Oil Spill History Description (sec. 1.4.4)**	YES	NO	N/A
	Date of discharge(s)	☑	☐	☐
	List of discharge causes	☑	☐	☐
	Material(s) discharged	☑	☐	☐
	Amount of discharges (gallons)	☑	☐	☐
	Amount that reached navigable waters (if applicable)	☑	☐	☐
	Effectiveness and capacity of secondary containment	☑	☐	☐
	Clean-up actions taken	☑	☐	☐
	Steps taken to reduce possibility of reccurrence	☑	☐	☐
	Total oil storage capacity of tank(s) or impoundment(s) from which material discharged	☑	☐	☐
	Enforcement actions	☑	☐	☐
	Effectiveness of monitoring equipment	☑	☐	☐
	Description(s) of how each oil discharge was detected	☑	☐	☐
Please use the following space to note any missing or incomplete information in Sectio 1.4.4 of the Plan. **Mentions a spill in 2007 but it is claimed that there were no reportable spills and therefore none of the criteria apply - please explain.**				

	N. Discharge Scenarios (sec. 1.5)	YES	NO	N/A
	Small Discharges (sec. 1.5.1)(Description of small discharges addressing facility operations and components including but not limited to (see. 1.5.1.1):			
	Loading and unloading operations	☑	☐	☐
	Facility maintenance operation	☑	☐	☐
	Facility piping	☑	☐	☐
	Pumping stations and sumps	☑	☐	☐
	Oil storage location	☑	☐	☐
	Vehicle refueling operations	☐	☐	☑
	Age and condition of facility components	☑	☐	☐
	Small volume discharge calculation for a facility	☑	☐	☐
	Facility-specific spill potential analysis	☑	☐	☐
	Average most probable discharge for complexes	☐	☐	☑
	1,000 feet of boom (1 hour deployment time)	☑	☐	☐
	Correct amount of boom for complexes	☐	☐	☑
	Oil recovery devices equal to small discharge (2 hour recovery time)	☑	☐	☐
	Oil storage capacity for recovered material	☑	☐	☐
	Scenarios Affected by the Response Efforts (sec. 1.5.1.2)			
	Size of the discharge	☑	☐	☐
	Proximity to downgradient wells, waterways, and drinking water intakes	☑	☐	☐
	Proximity to fish and wildlife and sensitive environments	☑	☐	☐
	Likelihood that the discharge will travel offsite (i.e., topography, drainage)	☑	☐	☐
	Location of the material discharged (i.e., on a concrete pad or directly on the soil)	☑	☐	☐
	Material discharged	☑	☐	☐
	Weather or aquatic conditions (i.e., river flow)	☑	☐	☐
	Available remediation equipment	☑	☐	☐
	Probability of a chain reaction of failures	☑	☐	☐
	Direction of discharge pathway	☑	☐	☐
	Medium Discharges (sec. 1.5.1)(Description of medium discharges scenarios addressing facility operations and components including but not limited to (sec. 1.5.1.1):			
	Loading and unloading operations	☑	☐	☐
	Facility maintenance operation	☑	☐	☐
	Facility piping	☑	☐	☐
	Pumping stations and sumps	☑	☐	☐
	Oil storage location	☑	☐	☐
	Vehicle refueling operations	☐	☐	☑
	Age and condition of facility components	☑	☐	☐

	Medium volume discharge calculation for a facility	☑	☐	☐
	Facility-specific spill potential analysis	☑	☐	☐
	Maximum most probably discharge for complexes	☐	☐	☑
	Oil recovery devices equal to medium discharge	☑	☐	☐
	Availability of sufficient quantity of boom	☑	☐	☐
	Oil storage capacity for recovered material	☑	☐	☐
	Scenarios Affected by the Response Efforts (sec. 1.5.1.2)			
	Size of the discharge	☑	☐	☐
	Proximity to downgradient wells, waterways, and drinking water intakes	☑	☐	☐
	Proximity to fish and wildlife and sensitive environments	☑	☐	☐
	Likelihood that the discharge will travel offsite (i.e., topography, drainage)	☑	☐	☐
	Location of the material discharged (i.e., on a concrete pad or directly on the soil)	☑	☐	☐
	Material discharged	☑	☐	☐
	Weather or aquatic conditions (i.e., river flow)	☑	☐	☐
	Available remediation equipment	☑	☐	☐
	Probability of a chain reaction of failures	☑	☐	☐
	Direction of discharge pathway	☑	☐	☐
Please use the following space to note any missing or incomplete information in Section 1.5.1 of the Plan and to assess the accuracy of the information provided based on field inspection.				

112.20(h)(5)(i)	**O. Worst Case Discharge (sec. 1.5.2)** (See Appendix A) (When planning for the worst case discharge response all of the factors listed in the small and medium discharge section of the response plan shall be addressed)	YES	NO	N/A
	Facility Specific Worst Case Discharge Scenario	☑	☐	☐
	Description of worst case discharges scenarios addressing facility operations and components including but not limited to (sec. 1.5.1.1):			
	Loading and unloading operations	☐	☐	☑
	Facility Maintenance Operation	☐	☐	☑
	Facility Piping	☐	☐	☑
	Pumping stations and sumps	☐	☐	☑
	Oil storage location	☑	☐	☐
	Vehicle refueling operations	☐	☐	☑
	Age and condition of facility components	☑	☐	☐
112 Appendix D	Correct Worst Case Discharge (WCD) calculation for specific type of facility	☑	☐	☐

	Correct WCD calculation for complexes	☐	☐	☑
112 Appendix E	Sufficient response resources for WCD	☐	☑	☐
	Sources and quantity of equipment for response to WCD	☑	☐	☐
	Oil storage capacity for recovered material	☐	☑	☐
	Scenarios Affected by the Response Efforts (sec. 1.5.1.2)			
	Size of the discharge	☑	☐	☐
	Proximity to downgradient wells, waterways, and drinking water intakes	☑	☐	☐
	Proximity to fish and wildlife and sensitive environments	☑	☐	☐
	Likelihood that the discharge will travel offsite (i.e., topography, drainage)	☑	☐	☐
	Location of the material discharged (i.e., on a concrete pad or directly on the soil)	☑	☐	☐
	Material discharged	☑	☐	☐
	Weather or aquatic conditions (i.e., river flow)	☑	☐	☐
	Available remediation equipment	☑	☐	☐
	Probability of a chain reaction of failures	☑	☐	☐
	Direction of discharge pathway	☑	☐	☐
Please use the following space to note any missing or incomplete information in Section 1.5.2 of the Plan and to assess the accuracy of the information provided based on field inspection.**Nearshore/great lakes scenerio was used for calculations when rivers/canals scenerio should have been used. Storage capacity of recovered material not addressed in the plan. Revised planning volume calculations submitted and inserted into plan.**				

112.20(h)(6)	**P. Discharge Detection Systems (sec. 1.6)**	YES	NO	N/A
	Discharge Detection by Personnel (sec. 1.6.1)			
	Description of procedures and personnel for spill detection	☑	☐	☐
	Description of facility inspections	☑	☐	☐
	Description of initial response actions	☑	☐	☐
	Emergency Response Information (referenced)	☑	☐	☐
Please use the following space to note any missing or incomplete information in Section 1.6.1 of the plan.				

Section II, 112.7(e)(5)(iii)(D), 112.7(e)(5(iii), 112.7(e)(2)(viii), 112.7(e)(7)(v), Appendix A	**Automated Discharge Detection (sec. 1.6.2)**			
	Description of automatic spill detection equipment, including overfill alarms and secondary containment sensors	☑	☐	☐
	Description of alarm verification procedures and subsequent actions	☑	☐	☐
	Initial response actions	☑	☐	☐
Please use the following space to note any missing or incomplete information in Section 1.6.2 of the Plan.				

112.20(h)(7), Appendix E	**Q. Plan Implementation (sec. 1.7)**	YES	NO	N/A
	Identification of response resources for small, medium, and worst case spills (sec. 1.7.1)			
	Description of response actions			
	Accessibility of proper response personnel and equipment	☑	☐	☐
	Emergency plans for spill response	☑	☐	☐
	Additional response training	☑	☐	☐
	Additional contracted help	☑	☐	☐
	Access to additional response equipment/experts	☑	☐	☐
	Ability to implement plan, including response training and practice drills	☑	☐	☐
	Temporary storage	☑	☐	☐
	Recommended form detailing immediate action for small, medium and Worst Case spills (sec. 1.7.1.2A) (stop the product flow, warn personnel, shut off ignition sources, initiate containment, notify NRC, notify OSC, notify (as appropriate))	☑	☐	☐
Please use the following space to note any missing or incomplete information in Section 1.7.1 of the Plan.				
	Disposal Plan (sec. 1.7.2)			
	Description of procedures for recovering, reusing, decontaminating or disposing of materials	☑	☐	☐
	Materials addressed in Disposal Plan (recovered product, contaminated soil, contaminated equipment and materials (including drums tank parts, valves and shovels), personnel protective equipment, decontamination solutions, absorbents, spent chemicals))	☑	☐	☐
	Plan prepared in accordance with any federal, state, and/or local regulations	☑	☐	☐

	Plan addresses permits required to transport or dispose of recovered materials	☑	☐	☐
Please use the following space to note any missing or incomplete information in Section 1.7.2 of the Plan.				
Section II, 112.7(e)(1), 112.7(e)(7), Appendix A	**Containment and Drainage Planning (sec. 1.7.3)**			
	Description of containing/controlling a spill through drainage			
	Containment and drainage plan available	☑	☐	☐
	Available volume of containment	☑	☐	☐
	Drainage route from oil storage and transfer areas	☑	☐	☐
	Construction materials used in drainage troughs	☐	☐	☑
	Type and number of valves and separators in drainage system	☐	☐	☑
	Sump pump capacities	☐	☐	☑
	Containment capacities of weirs and booms and their location	☐	☐	☑
	Other cleanup materials	☑	☐	☐
Please use the following space to note any missing and incomplete information in Section 1.7.3 of the Plan and to assess the accuracy of the information provided during field inspection.				

	R. Self-Inspection, Training, and Meeting Logs (sec. 1.8)	YES	NO	N/A
	Facility Self-Inspection (sec. 1.8.1)			
Section II, 112.7(e)(8)	Records of tank inspections with dates (tank leaks, tank foundations, tank Piping) contained or cross-referenced in Plan or maintained electronically for five years	☑	☐	☐
Section II, 112.7(e)(8)	Records of secondary containment inspections with dates (dike or berm system, secondary containment, retention and drainage ponds) contained or cross-referenced in Plan or maintained electronically for five years	☑	☐	☐
112.20(h)(8)(i)	Response equipment inspection			
	Response equipment checklist (sec. 1.8.1.2)	☑	☐	☐
	Equipment inventory (item and quantity)	☑	☐	☐
	Storage location (time to access and respond)	☑	☐	☐
	Accessibility (time to access and respond)	☑	☐	☐
	Operational status/condition	☑	☐	☐
	Actual use/testing (last test date and frequency of testing)	☑	☐	☐
	Shelf life (present age, expected replacement date)	☑	☐	☐
	- Inspection date	☑	☐	☐
	- Inspector's signature	☑	☐	☐
	- Inspection records maintained for 5 years	☑	☐	☐

	- Response equipment inspection log (inspector, date, comments)	☑	☐	☐
Please use the following space to note any missing or incomplete information in Section 1.8 of the Plan and to assess the accuracy of the information.				
	Facility Drills/Exercises (sec. 1.8.2)			
	Description of drill/exercise program based on National Preparedness for Response Exercise Program (PREP) guidelines or other comparable program	☑	☐	☐
	- If "no" alternative program has been approved by EPA RA (describe program below)	☐	☐	☑
	QI notification drill	☑	☐	☐
	Spill management team tabletop exercise	☑	☐	☐
	Equipment deployment exercise	☑	☐	☐
	Unannounced exercise	☑	☐	☐
	Area exercise	☑	☐	☐
	Description of evaluation procedures for drill program	☑	☐	☐
	Qualified Individual notification drill log (sec. 1.8.2.1)			
	Date, company, qualified individual, other contacted, emergency scenario, evaluation	☑	☐	☐
	Spill management team tabletop drill log (sec. 1.8.2.2)			
	Date, company, QI, participants, emergency scenario, evaluation, changes to be implemented, time table for implementation	☑	☐	☐
Please use the following space to note any missing or incomplete information in Section 1.8.2 of the Plan and to assess the accuracy of the information provided based on field inspection.				
	Response Training (sec. 1.8.3)			
	Description of response training program (including topics)	☑	☐	☐
	Personnel response training logs (name, response training date/and number of hours, prevention training date/and number of hours)	☑	☐	☐
	Discharge prevention meeting logs (date, attendees)	☑	☐	☐
Please use the following space to note any missing or incomplete information in Section 1.8.3 of the Plan and verify that the log information is up-to-date during the field inspection.				

	S. Diagrams (sec. 1.9)	YES	NO	N/A
	Site Plan Diagram			
	Entire facility to scale	☑	☐	☐
	Above and below-ground storage tanks	☑	☐	☐
	Contents and capacities of bulk oil storage tanks	☑	☐	☐
	Contents and capacities of drum storage areas	☐	☐	☑
	Contents and capacities of surface impoundments	☐	☐	☑
	Process buildings	☐	☐	☑
	Transfer areas	☑	☐	☐
	Location and capacity of secondary containment systems	☑	☐	☐
	Location of hazardous materials	☑	☐	☐
	Location of communications and emergency response equipment	☑	☐	☐
	Location of electrical equipment that might contain oil	☐	☐	☑
	If the facility is a complex facility, the interface between EPA and other regulating agencies	☐	☐	☑
Please use the following space to note any missing or incomplete information in the Site Plan diagram and to assess the accuracy of the diagram based on field inspection.				
	Site Drainage Plan Diagram			
	Major sanitary and storm sewers, manholes, and drains	☑	☐	☐
	Weirs and shut-off valves	☑	☐	☐
	Surface water receiving streams	☑	☐	☐
	Fire fighting water sources	☑	☐	☐
	Other utilities	☐	☐	☑
	Response personnel ingress and egress	☑	☐	☐
	Response equipment transportation routes	☑	☐	☐
	Direction of spill flow from discharge points	☑	☐	☐
Please use the following space to note any missing or incomplete information in the Site Drainage Plan diagram and to assess the accuracy of the diagram based on field inspection.				
	Site Evacuation Plan Diagram			
	Site plan diagram with evacuation routes	☑	☐	☐
	Location of evacuation regrouping areas	☑	☐	☐
Please use the following space to note any missing or incomplete information in the Site Evacuation Drainage Plan diagram and to assess the accuracy of the diagram based on field inspection.				

Section II, 112.7(e)(9)	T. Site Security (sec. 1.10)	YES	NO	N/A
	• Description of facility security	☑	☐	☐
	(Emergency cut-off locations, enclosures, guards and their duties, lighting, valve and pump locks, pipeline connection caps)	☑	☐	☐

Please use the following space to note any missing or incomplete information in Section 1.10 of the plan and to assess the accuracy of the information provided based on field inspection.

Please use the following space to describe overall impressions of the facility response plan (i.e., functional, workable). A set of questions is provided in Appendix C to assist the inspector is assessing overall Plan adequacy.

Reviewed by:	Tom Nolld for Paul Doherty
Date:	11/14/14

Facility Response Plan Field Inspection Checklist

Activity Information	
Activity Type	**FRP Field Inspection**
Activity Date	7/21/2014
EPA Inspector	Paul Doherty, Eric Nold, Kevin Larson

Facility Information		
Facility ID:	FRP Harm Category? ☐ Substantial Harm ☑ Significant & Substantial Harm	
FRP ID:	Complex? ☐ Yes ☑ No	
	If Complex, Shared Jurisdiction? ☐ Yes ☐ No ☐ N/A	
Facility Name: St. Joseph Terminal		
Mailing Address: 963 Vermont Road		
City: Wathena		
State: KS		Zip: 66090
Facility Owner: Magellan LLP		
FRP Contact:		
Telephone: (785)989-3448		
Email:		
QI:		
Telephone:		
Email:		
Notes/Comments:		

112.20(h), 112 Appendix F Section 1.0	**A. General**	Yes	No	N/A
112 Appendix F Section 1.0	Copy of FRP is available at the facility	☑	☐	☐
112.20(h)(1), 112 Appendix F Section 1.1	Copy of Emergency Response Action Plan is available at the facility.	☑	☐	☐
112.20(h)(1)(vi), 112.20(h)(3)(vii), 112 Appendix F Section 1.3.5	Evacuation plan is readily available.	☑	☐	☐
Describe how the facility incorporates the FRP into its overall training program:				
Notes				

112.20(h), 112 Appendix F Section 1.3.1	**B. Spill Notification**	Yes	No	N/A
112,20(h)(1)(ii), 112.20(h)(3)(iii), 112 Appendix F Section 1.3.1	Spill notification call-down list contains correct telephone numbers.	☑	☐	☐
112,20(h)(1)(ii), 112.20(h)(3)(iii), 112 Appendix F Section 1.3.1	Emergency contact information has been verified as current.	☑	☐	☐
Notes				

112.20(h)(4), 112 Appendix F Section 1.4	**C. Hazard Evaluation**	Yes	No	N/A
112 Appendix F Section 1.4.1	Facility total storage capacity corresponds to storage capacity reported in the plan	☐	☑	☐
112 Appendix F Section 1.4.1	Secondary containment is adequate for all aboveground tanks	☑	☐	☐
112 Appendix F Sections 1.4.2 and 1.4.3	Following factors affecting response efforts are properly addressed / characterized:	☐	☐	☐
	- Discharge volume	☑	☐	☐
	- Proximity to downgradient water	☑	☐	☐

	- Proximity to fish and wildlife and sensitive environments	☑	☐	☐
	- Proximity to drinking water intakes	☑	☐	☐
	- Likelihood that discharge will travel offsite	☑	☐	☐
	- Location of material spilled (i.e., on concrete pad or soil)	☑	☐	☐
	- Type of material discharged	☑	☐	☐
	- Weather or aquatic conditions anticipated during adverse conditions	☑	☐	☐
	- Available remediation equipment	☑	☐	☐
	- Probability of chain reaction or failures	☑	☐	☐
	- Direction of spill	☑	☐	☐
112 Appendix F Section 1.4.4	History of all reportable discharges at the facility is maintained with the FRP	☑	☐	☐

Notes Currently the diesel tank is not in use but the plan still accounts for its capacity in the overall facility total storage capacity. They are evaluating whether tank will ever be put back into service.

112 Appendix F Section 1.5	**D. Discharge Scenarios**	Yes	No	N/A
112.20(h)(5)(i), 112 Appendix F Section 1.5.2	Worst-case discharge scenario described in Plan is accurate (e.g., source and impacts)	☑	☐	☐
112 Appendix F Section 1.5.1	Medium discharge scenario described in Plan is accurate (e.g., source and impacts)	☑	☐	☐
112 Appendix F Section 1.5.1	Small discharge scenario described in Plan is accurate (e.g., source and impacts)	☑	☐	☐

Notes

112.20(h)(1) and (h)(3)(ix), 112 Appendix F Sections 1.3.6 and 1.6	**E. Response Personnel**	Yes	No	N/A
112.20(h)(1)(i), 112 Appendix F Section 1.2	Qualified Individual (QI) information (name, title, telephone numbers) is current	☑	☐	☐
112.20(h)(3)(ix), 112 Appendix F Section 1.3.6	QI is aware of, and prepared to fulfill, responsibilities:	☐	☐	☐
112.20(h)(3)(ix)(A), 112 Appendix F Section 1.3.6	- Activate internal alarms and hazard communication systems	☑	☐	☐
112.20(h)(3)(ix)(B), 112 Appendix F Section 1.3.6	- Notify response personnel	☑	☐	☐

112.20(h)(3)(ix)(C), 112 Appendix F Section 1.3.6	- Identify character, exact source, amount, and extent of the release	☑	☐	☐
112.20(h)(3)(ix)(D), 112 Appendix F Section 1.3.6	- Notify and provide information to appropriate Federal, State, and local authorities	☑	☐	☐
112.20(h)(3)(ix)(E), 112 Appendix F Section 1.3.6	- Assess interaction of substances with water and/or other substances stored at facility and notify on-scene response personnel of assessment	☑	☐	☐
112.20(h)(3)(ix)(F), 112 Appendix F Section 1.3.6	- Assess possible hazards to human health and the environment	☑	☐	☐
112.20(h)(3)(ix)(G), 112 Appendix F Section 1.3.6	- Assess and implement prompt removal actions	☑	☐	☐
112.20(h)(3)(ix)(H), 112 Appendix F Section 1.3.6	- Coordinate rescue and response actions	☑	☐	☐
112.20(h)(3)(ix)(I), 112 Appendix F Section 1.3.6	- Access company funding to initiate cleanup activities	☑	☐	☐
112.20(h)(3)(ix)(J), 112 Appendix F Section 1.3.6	- Direct cleanup activities	☑	☐	☐
112 Appendix F Section 1.2	QI has specific response training experience	☑	☐	☐
112 Appendix F Section 1.6	Facility personnel are familiar with procedures for detecting a discharge	☑	☐	☐
Notes				

112.20, 112 Appendices E and F	**F. Response Equipment**	Yes	No	N/A
112 Appendix E Section 3.0	Required response resources for a small discharge are provided.	☑	☐	☐
112 Appendix E Section 3.3.1	- 1,000 ft of boom and, if marine transfer facility, boom equal to twice the length of largest vessel	☑	☐	☐
112 Appendix E Section 3.3.1	- Capacity of deploying boom within 1 hour of small discharge	☑	☐	☐
112 Appendix E Section 3.3.2	- Response equipment capable of being deployed within 2 hours of a small discharge	☑	☐	☐
112 Appendix E Section 3.3.2	- Response equipment daily recovery capacity equal to the total volume of small discharge	☑	☐	☐
112 Appendix E Section 12.2	- Temporary storage capacity equal to twice the volume of the small discharge	☑	☐	☐
112 Appendix E Section 4.0	Required response resources for a medium discharge are provided:	☑	☐	☐
112 Appendix E Section 4.5	- Sufficient quantities of boom for containment and collection and for protection	☑	☐	☐
112 Appendix E Section 4.4	- Response equipment daily recovery capacity equal to 50% of total volume of small discharge	☑	☐	☐
112.20(h)(3)(ii), 112 Appendix F Section 1.3.4	Facility has current signed contract with response contractor and/or membership in cleanup co-op.	☑	☐	☐
	- If YES, facility has evidence of contractor's equipment deployment exercises (annually)	☑	☐	☐
112.20, 112 Appendix F	Facility has its own response equipment.	☑	☐	☐
112.20(h)(8)(i) and (ii), 112 Appendix F Section 1.3.3, 112 Appendix F Section 1.8.1.2	- If YES, facility response equipment is regularly inspected (check logs)	☑	☐	☐
112 Appendix F Section 1.3.2	Following equipment is provided and, if so, is operational, accessible, and has adequate capacity:	☐	☐	☐
112 Appendix F Section 1.3.2(1)	- Skimmers	☐	☑	☐
112 Appendix F Section 1.3.2(1)	- Pumps	☑	☐	☐

112 Appendix F Section 1.3.2(2)	- Containment booms	☐	☐	☐
112 Appendix F Section 1.3.2(5)	- Sorbents	☑	☐	☐
112 Appendix F Section 1.3.2(3)	- Chemical countermeasures	☐	☐	☑
112 Appendix F Section 1.3.2(7)	- Communication equipment	☑	☐	☐
112 Appendix F Section 1.3.2(8)	- Firefighting equipment	☑	☐	☐
112 Appendix F Section 1.3.2(8)	- Personal protective equipment	☑	☐	☐
112 Appendix F Section 1.3.2(9)	- Other equipment, boots, motors, etc.	☑	☐	☐
112 Appendix F Section 1.7.2	Procedures have been established for recovering, reusing, decontaminating or disposing of materials	☑	☐	☐
Notes				

112 Appendix F Section 1.8.1	**G. Self Inspection**	Yes	No	N/A
112 Appendix F Section 1.8.1	Records of tank inspections are maintained (check last 5 years of records)	☑	☐	☐
	The following industry standard(s) are used to inspect aboveground bulk storage containers:	☐	☐	☐
	- Steel Tank Institute (STI) SP-001	☑	☐	☐
	- American Petroleum Institute (API) Standard 653	☑	☐	☐
	- Hybrid program developed by Professional Engineer	☑	☐	☐
	- Other (specify in notes/comments section below)	☐	☐	☑
112 Appendix F Section 1.8.1	Records of secondary containment inspections are maintained (check last 5 years of records)	☑	☐	☐
112.20(h)(6), 112 Appendix F Section 1.6	Automatic discharge detection/prevention systems are inspected/tested regularly (overfill alarms, secondary containment sensors)	☑	☐	☐
112 Appendix F Section 1.8.3	Discharge prevention meetings are held periodically (check last 5 years of records)	☑	☐	☐
Notes				

112.20(h)(8)(ii), 112.21, Appendix F Section 1.8.2	**H. Drills/Exercises**	Yes	No	N/A
112.21(c), 112 Appendix F Section 1.8.2	Facility drills/exercises program is based on National Preparedness for Response Exercise Program (PREP) Guidelines	☑	☐	☐
	- If NO, alternative program has been approved by the EPA RA.	☐	☐	☑
	QI notification drills are performed (quarterly)	☑	☐	☐
	Spill Management Team Tabletop Exercises are performed (annually)	☑	☐	☐
	Facility Equipment Deployment Exercises are performed (semi-annually)	☑	☐	☐
	Unannounced Exercises are performed (annually)	☑	☐	☐
	Area Exercises are performed	☑	☐	☐
Notes				

112.20(h)(9), 112 Appendix F Section 1.9	**I. Diagrams**	Yes	No	N/A
112 Appendix F Section 1.9(1)	Site plan diagram appears to accurately represent the facility	☑	☐	☐
112 Appendix F Section 1.9(2)	Drainage plan appears to accurately represent the facility	☑	☐	☐
Notes				

Field Notes	
Area	**Notes/Remarks**

Photo Documentation Log	
Photo Number	**Description (include date, location and direction)**

FRP Planning Distance Calculation Worksheet

40 CFR 112, Appendix C

The facility must evaluate whether the facility is located at a distance such that a discharge from the facility could cause injury to the environment or a public drinking water intake.

A regulated facility may meet substantial harm criteria without having to perform a planning distance calculation. The planning distance calculation is not necessary for facilities that have inadequate secondary containment or that have experienced a reportable spill in an amount greater than or equal to 10,000 gallons (238 barrels) within the past 5 years.

If more than one type of navigable water condition applies to a facility, then the facility is required to perform a planning distance calculation for each navigable water type to determine the greatest single distance that oil may be transported.

I. Moving Navigable Water Calculation

☐ Not Applicable?

A) Planning Distance (miles) = PD = v * t * c (miles)

Chezy-Manning Equation (ft/s) = $v = (1.5/n) * r^{2/3} * s^{1/2}$

where:

n = Manning's Roughness Coefficient (Table 1, 40 CFR 112, Appendix C)	=	0.035	
r = Hydraulic Radius in ft (average mid-channel depth * 0.667)	=	6.003	feet
s = Average Slope of Moving Waterway (USGS Topo Map)	=	9.00E-05	
	v =	1.343	feet/second
t = Time Interval (hours) (Table 3, 40 CFR 112, Appendix C)	=	27	hours
c = Constant Conversion Factor	=	0.68	sec*mile / hr*ft
Planning Distance	=	24.66	miles

I. Oil Transport on Still Water

☐ Not Applicable?

A) Surface Area Covered by an Oil Spill (ft^2) = A_1

$A_1 = 10^5 * V^{3/4} * C$

where:

V = Worst Case Discharge Volume (gallons)	=	2,321,890	gallons
C = Constant Conversion Factor	=	0.1643	
A_1	=	977279512	$feet^2$

B) Spreading Formula (ft^2) = A_2

$A_2 = (\pi * r^2)/2$

Solving for the radius, r, using $A_1 = A_2$, then $r = [(2 * A_1)/\pi]^{1/2}$

r	=	24943.04	feet
r	=	4.72	miles

C) Total Planning Distance = Spreading Distance + 18.6 miles = 23.32 miles

Worst Case Discharge Worksheet

40 CFR 112, Appendix D

I. Single Tank Facilities

☑ Not Applicable?

The Tank's Capacity = _____ gallons

A) Secondary Containment is Adequate

The Worst Case Discharge is 80% of the Tank's Capacity = 0 gallons

B) Secondary Containment is not Adequate

The Worst Case Discharge is Equal to the Tank's Capacity = 0 gallons

II. Multiple Tank Facilities

☐ Not Applicable?

A) All Aboveground Storage Tanks (ASTs) Lack Adequate Secondary Containment

The Worst Case Discharge is Equal to the Total Capacity of all ASTs = 0 gallons

B) Some or All ASTs Have Adequate Secondary Containment

The Total Storage Capacity of ASTs Without Adequate Containment = 0 gallons

The Capacity of the Largest AST with Adequate Containment = 2,321,890 gallons

The Worst Case Discharge is the Sum of the Above Capacities = 2321890 gallons

The Worst Case Discharge Is 2,321,890 gallons

55,283 barrels

add USCG equivalents
add DOT equivalents
add small and medium discharge calculations

Worksheet to Plan Volume of Response Resources for Worst Case Discharge

40 CFR 112, Appendix E

I. Background Information

A) (A) = The Worst Case Discharge in Barrels = 55,283 barrels

B) Oil Group Designation (Section 1.2.3, 1.2.8, and 1.2.9) = 1

C) Operating Area (input "Rivers and Canals" or "Inland/Nearshore" or "Great Lakes")
= rivers and canals

D) Oil Percentages (Table 2) =

Percent Natural Dissipation	(D1)	80
Percent Recovered Floating Oil	(D2)	10
Percent Oil Onshore	(D3)	10

E) (E1) = On-Water Oil Recovery = 5528.31 barrels
(E2) = Shoreline Recovery = 5528.31 barrels

F) (F) = Emulsification Factor = 1

G) On-Water Oil Recovery Resource Mobilization Factor (Table 4) =

Tier 1	(G1)	0.3
Tier 2	(G2)	0.4
Tier 3	(G3)	0.6

II. On-Water Oil Recovery Capacity (barrels/day)

Tier 1	Tier 2	Tier 3
1658.49	2211.32	3316.99

III. Shoreline Cleanup Volume (barrels)

Shoreline Cleanup Volume = 5528.31 barrels

IV. On-Water Response Capacity by Operating Area

Current date 5/14/2014

Tier 1 (J1)	Tier 2 (J2)	Tier 3 (J3)
1875.00	3750.00	7500.00

this is incorrect; should 12,500 bbl/d

V. On-Water Amount Needed to Be Identified but not Contracted for in Advance (barrels/day)

Tier 1	Tier 2	Tier 3
-216.51	-1538.68	-4183.01

if values are negative, response should "0".

Attachment 2

Figures

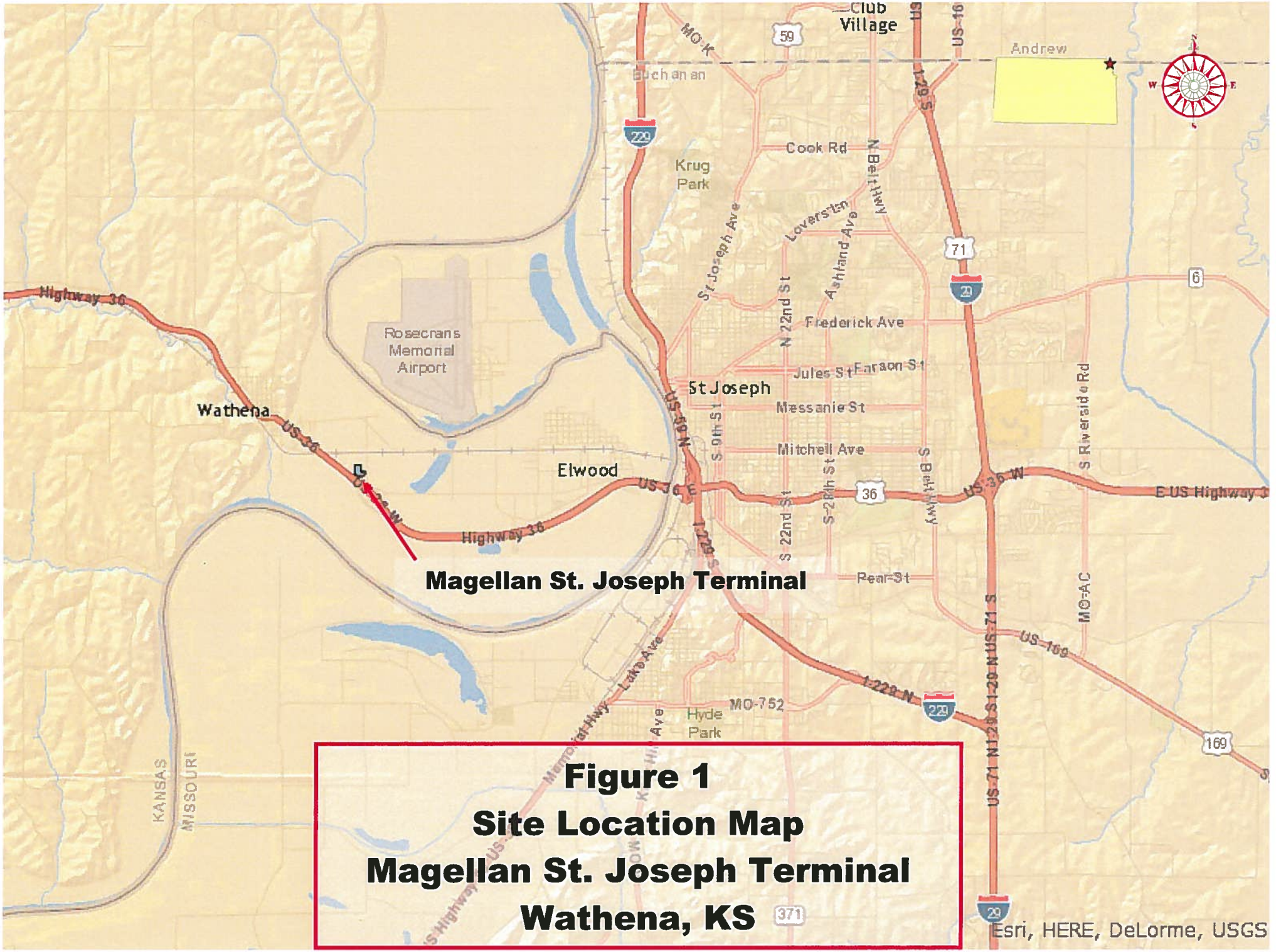


Figure 1
Site Location Map
Magellan St. Joseph Terminal
Wathena, KS

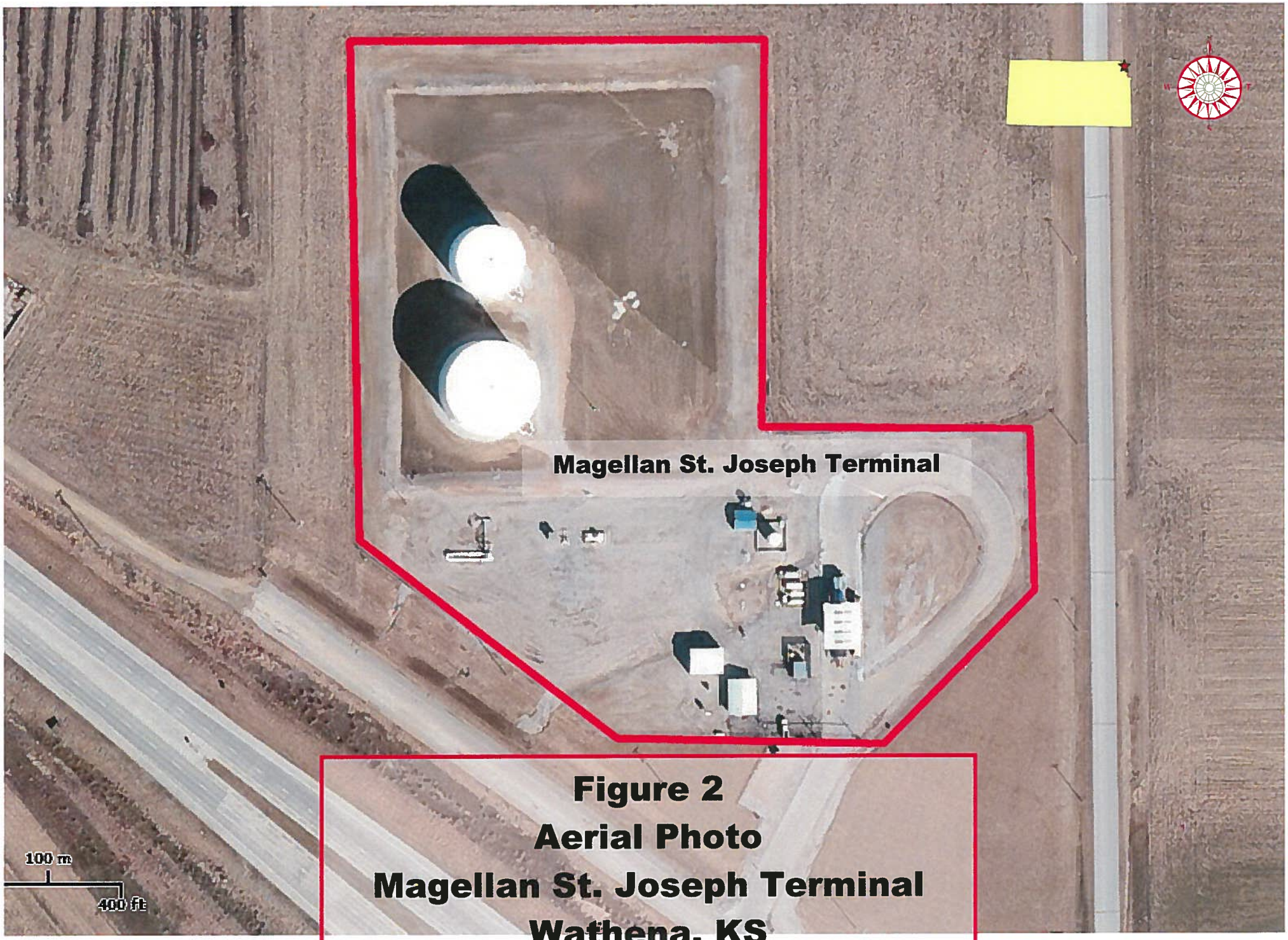


Figure 2
Aerial Photo
Magellan St. Joseph Terminal
Wathena, KS

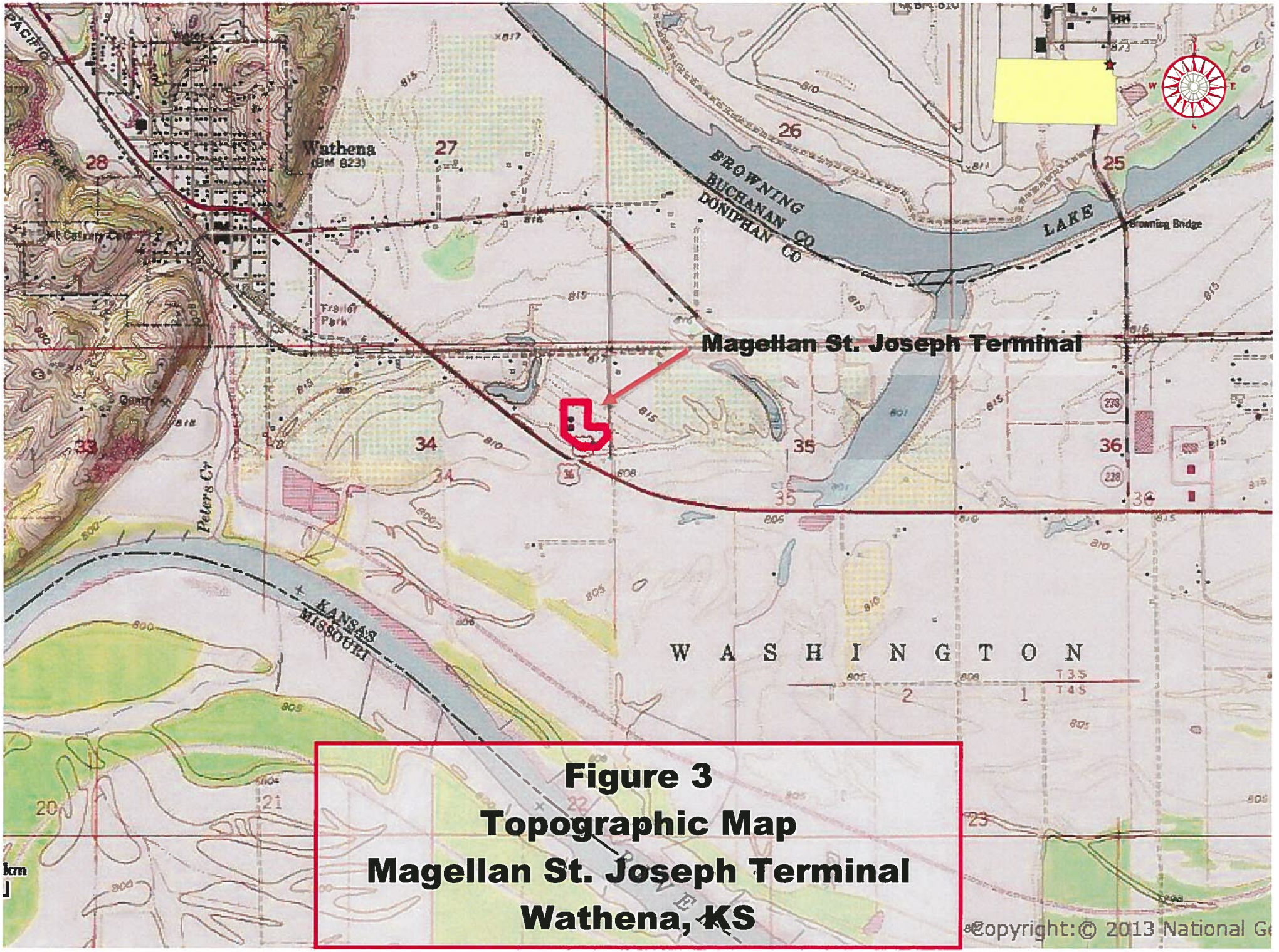


Figure 3
Topographic Map
Magellan St. Joseph Terminal
Wathena, KS

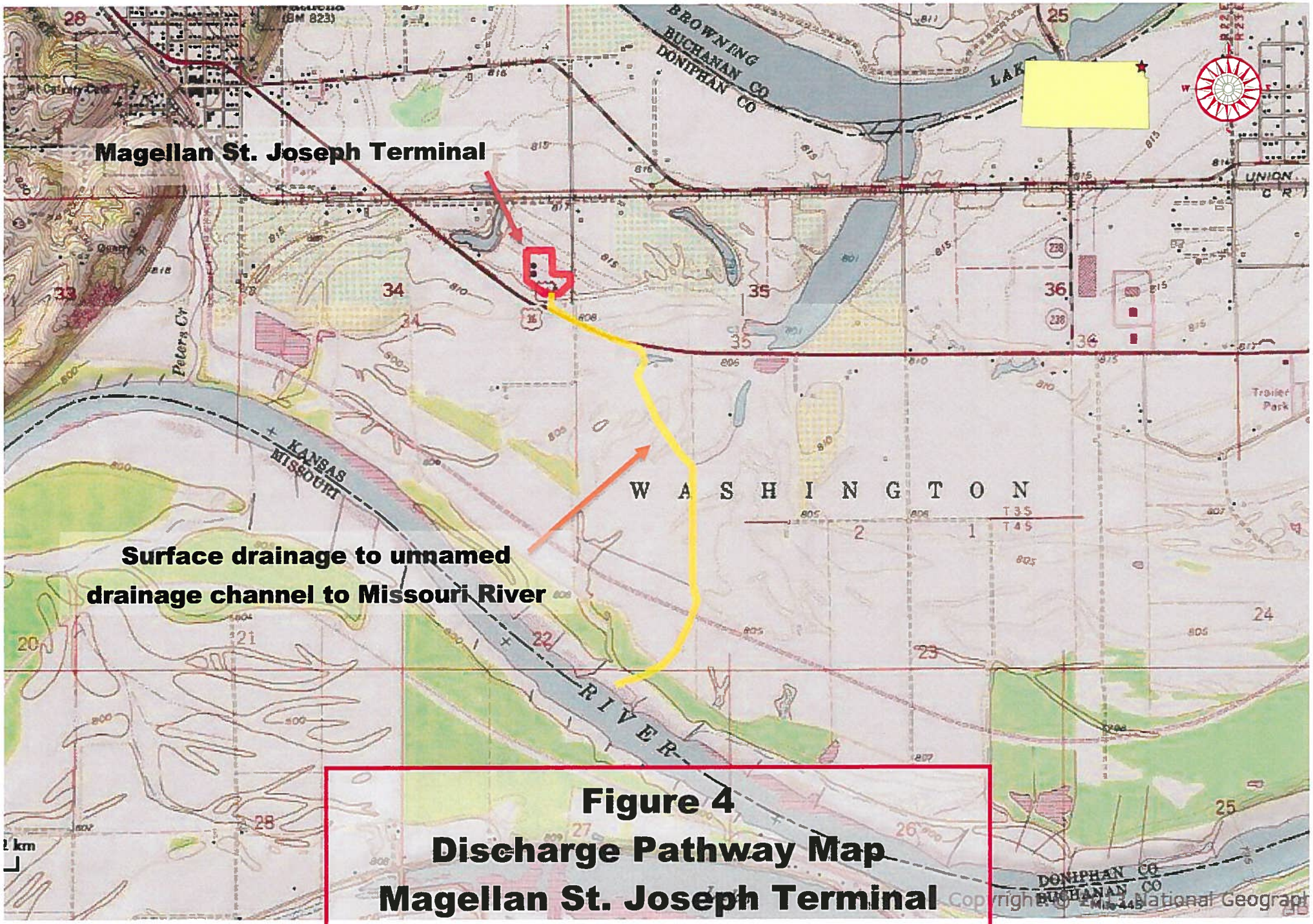


Figure 4
Discharge Pathway Map
Magellan St. Joseph Terminal
Wathena, KS

Attachment 3

Photos

Photo: # 1 Site: Magellan St. Joseph Terminal, Wathena, KS Date: 7/21/2014 Time: AM
Direction: North Photographer: Paul Doherty, EPA Witness: Eric Nold, EPA and Kevin Larson, EPA
Description: View of Magellan St. Joseph Terminal entrance sign.

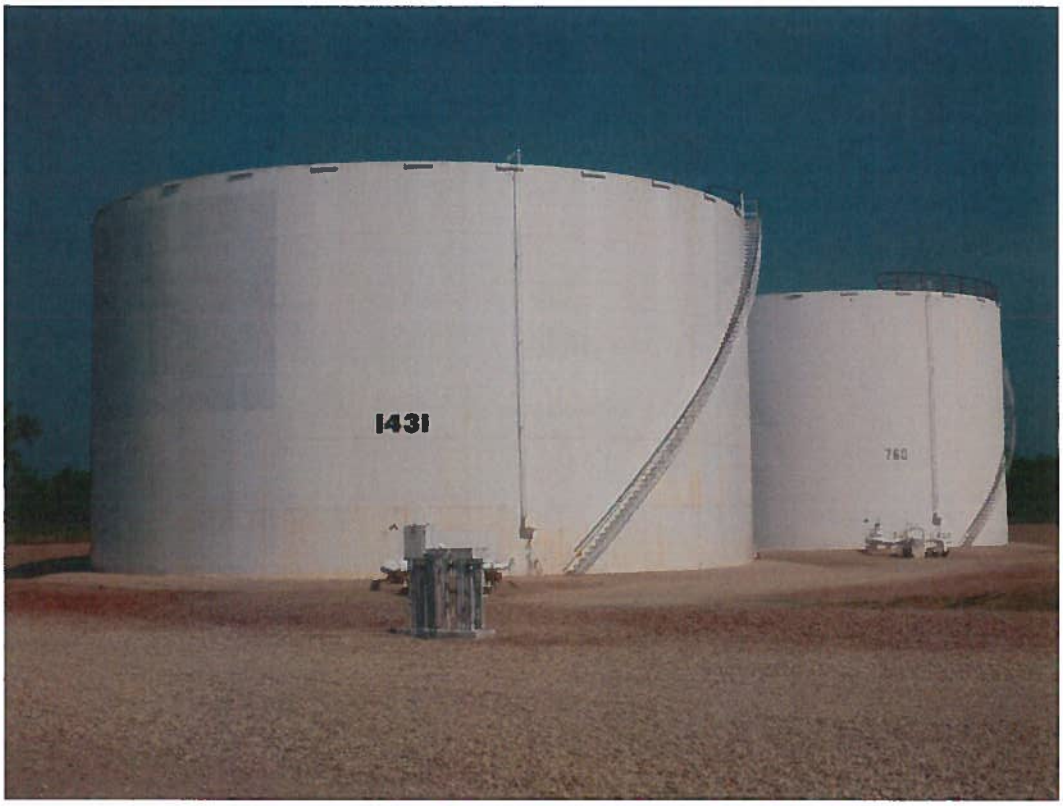


Photo: # 2 Site: Magellan St. Joseph Terminal, Wathena, KS Date: 7/21/2014 Time: AM
Direction: North Photographer: Paul Doherty, EPA Witness: Eric Nold, EPA and Kevin Larson, EPA
Description: View of bulk storage tanks inside containment.

Photo: # 3 Site: Magellan St. Joseph Terminal, Wathena, KS Date: 7/21/2014 Time: AM
Direction: West Photographer: Paul Doherty, EPA Witness: Eric Nold, EPA and Kevin Larson, EPA
Description: View of response trailer and response equipment.

Photo: # 4 Site: Magellan St. Joseph Terminal, Wathena, KS Date: 7/21/2014 Time: AM
Direction: Northwest Photographer: Paul Doherty, EPA Witness: Eric Nold, EPA and Kevin Larson, EPA
Description: View of drainage ditch along Highway 36 Outer Road. The drainage culvert under the entrance road is a tactical response location

Photo: # 5 Site: Magellan St. Joseph Terminal, Wathena, KS Date: 7/21/2014 Time: AM
Direction: Southeast Photographer: Paul Doherty, EPA Witness: Eric Nold, EPA and Kevin Larson, EPA
Description: Culvert under 165th street (north side) by the 165th Street exit off of Highway 36. The depression between the highway and the outer road is a tactical response location and provides equivalent containment capacity as 1,000 feet of hard boom.

Photo: # 6 Site: Magellan St. Joseph Terminal, Wathena, KS Date: 7/21/2014 Time: AM
Direction: Southeast Photographer: Paul Doherty, EPA Witness: Eric Nold, EPA and Kevin Larson, EPA
Description: Culvert under 165th street (south side) by the 165th Street exit off of Highway 36. The depression between the highway and the outer road is a tactical response location and provides equivalent containment capacity as 1,000 feet of hard boom.

Attachment 4

Confidential Business Information Claim Form and Receipt of Documents Form

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
CONFIDENTIALITY NOTICE

Facility Name:	Magellan Pipeline Co., L.P. – St. Joseph Terminal
Facility Address:	963 Vernon Road, Wathena, KS 66090
Inspector (print):	Paul Doherty
U.S. EPA, Region VII, 11201 Renner Road, Lenexa, KS 66219	Date: 7/21/2014

The United State Environmental Protection Agency (EPA) is obliged, under the Freedom of Information Act, to release information collected during inspections to persons who submit requests for that information. The Freedom of Information Act does, however, have provisions that allow EPA to withhold certain confidential business information from public disclosure. To claim protection for information gathered during this inspection you must request that the information be held CONFIDENTIAL and substantiate your claim in writing by demonstrating that the information meets the requirements in 40 CFR 2, Subpart B. The following criteria in Subpart B must be met:

1. Your company has taken measures to protect confidentiality of the information, and it intends to continue to take such measures.

2. No statute specifically requires disclosure of the information.

3. Disclosure of the information would cause substantial harm to your company's competitive position.

Information that you claim confidential will be held as such pending a determination of applicability by EPA.

I have received this Notice and DO NOT want to make a claim of confidentiality at this time.

Facility Representative Provided Notice:

BRIAN SIEBEN — 7/28/14

Print Name — Signature — Date

I have received this Notice and DO want to make a claim of confidentiality at this time.

Facility Representative Provided Notice:

_____ — _____ — _____

Print Name — Signature — Date

Information for which confidential treatment is requested:

_____

_____

_____

_____

_____

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
RECEIPT FOR DOCUMENTS AND SAMPLES

Facility Name:	Magellan Pipeline Co., L.P. – St. Joseph Terminal
Facility Address:	963 Vernon Road, Wathena, KS 66090

Documents Collected? YES __X__ (list below) NO ____

Samples Collected? YES ____ (list below) NO _X_

Split Samples: YES ____NO ____

Document/Samples were: 1. Received no charge ____2. Borrowed ____3. Purchased ____

Amount Paid: $_____Method: Cash ____Voucher ____To Be Billed ____

The documents and samples described below were collected in connection with the administration and enforcement of the applicable statute under which the information is obtained.

Receipt for the document (s) and/or sample(s) described below is hereby acknowledged:

equipment deployment documentation

equipment inspection documentation

training documentation

photos

Facility Representative (print)	Signature	Date
BRIAN SIEBEN		7/28/14
Inspector (print)	Signature	Date
Paul Doherty		7/21/2014
U.S. EPA, Region VII, 11201 Renner Road, Lenexa, KS 66219		

Attachment 5

Facility Contact Information

MAGELLAN
MIDSTREAM PARTNERS, L.P.

Brian Sieben
Environmental Specialist

13424 West 98th St.
Lenexa, KS 66215
Brian.Sieben@magellanlp.com

Office: 913 310 7731
Fax: 913 310 7790
Cell: 913 940 1597
Emerg/Toll Free: 800 720 2417

MAGELLAN
MIDSTREAM PARTNERS, L.P.

Jon Jacobs
Area Supervisor

13424 West 98th St.
Lenexa, KS 66215
Jon.Jacobs@magellanlp.com

Office: 913 310 7721
Fax: 913 310 7790
Cell: 913 626 8973
Emerg/Toll Free: 800 720 2417

Attachment 6

Facility Training and Exercise Documentation

Magellan Midstream Partners, L.P.			
TRAINING ATTENDANCE ROSTER		02–FORM–0201	
Magellan Commitment	01/01/05	Revision: 0	Page 1 of 2

Training Attendance Roster

Please complete all sections

Topic/Class Name (Print): **8hr Hazwoper Refresher** Course ID: _____

Hours: **8** Date(s): **3/4/2014** Location: **Kansas City, MO**

Instructor(s)/Facilitator(s)(print): **Skinner Ridge & Associates - Atiya Stverson**

Attendee's Name (Print)	Supervisor	Cost Center	Signature
Steve Hill	Tim Powers	5345	
Tyler Barnes	Tim Powers	5204	
James E. Slatton	Kevan Heil	5200	
James Mullen	Powers	5345	
Owen Worstell	Jacobs	5277	
Harry T. Wilhoit	J. Jacobs	5560	
Tyree W. Fletcher	J. Jacobs	5222	
Brian Comer	J. Myers	5935	
Kim O'Neal	Kevan Heil	5500	
Harry Scherzer	Kevan Heil	5500	
Ray Edwards	Kevan Heil	5200	
Brian Twenter	Kevan Heil	5500	

I certify that the above participants attended and completed training on the topic listed.

Instructor Signature: Atiya Stverson

Instructor 2 Signature: _____

Magellan Midstream Partners, L.P.			
TRAINING ATTENDANCE ROSTER		02-FORM-0201	
Magellan Commitment	01/01/05	Revision: 0	Page 1 of 2

Training Attendance Roster

Please complete all sections

Topic/Class Name (Print): **8hr Hazwoper Refresher** Course ID: _____

Hours: **8** Date(s): **2/25/2014** Location: **Kansas City, MO**

Instructor(s)/Facilitator(s)(print): **Skinner Ridge & Associates - Atiya Stverson**

Attendee's Name (Print)	Supervisor	Cost Center	Signature
Mark Halsell	Tim Powers	T-398	Mark Halsell
Rod Daylor	Tim Powers	5204	RDy/
Mike Oswald	Tim Powers	5205	
Kevin Whetstone	Kevan Heil	5200	Kevin Whetstone
Jim DeBrecht	Kevan Heil	5200	
Mark Halsell	Jon Jacobs	5277	
Carl Chandler	Kevan Heil	5200	Carl Chandler
Bob Heese	Matt Archer	5810	
Les Spence	Jon Jacobs	5560	
Charles Bever	Matt Archer	5810	
Tyler Kraus	Mark Lepich	5810	
John Mentzel	Jon Jacobs	5279	

I certify that the above participants attended and completed training on the topic listed.

Instructor Signature: Atiya Stverson

Instructor 2 Signature: _____

Magellan Midstream Partners, L.P.			
TRAINING ATTENDANCE ROSTER		02-FORM-0201	
Magellan Commitment	01/01/05	Revision: 0	Page 1 of 2

Training Attendance Roster

Please complete all sections

Topic/Class Name (Print): **Annual Topics** Course ID: _____

Hours: **8** Date(s): **3/5/2014** Location: **Kansas City, MO**

Instructor(s)/Facilitator(s)(print): **Skinner Ridge & Associates - Ativa Stverson**

Attendee's Name (Print)	Supervisor	Cost Center	Signature
Ray Edwards	Kevan Heil	5200	Ray Edwards
Harry Wilhoit	J. Jacobs	5560	
Leven Worstell	J Jacobs	5700	
Tyler K Fletcher	J Jacobs	5222	
	Kevan Heil	5200	M Scherzer
Brian Twenter	Kevan Heil	5200	

I certify that the above participants attended and completed training on the topic listed.

Instructor Signature: _____

Instructor 2 Signature: _____

Magellan Midstream Partners, L.P.			
TRAINING ATTENDANCE ROSTER		02–FORM–0201	
Magellan Commitment	01/01/05	Revision: 0	Page 1 of 2

Training Attendance Roster

Please complete all sections

Topic/Class Name (Print): **Annual Topics** Course ID: _____

Hours: **8** Date(s): **2/26/2014** Location: **Kansas City, MO**

Instructor(s)/Facilitator(s)(print): **Skinner Ridge & Associates - Atiya Stverson**

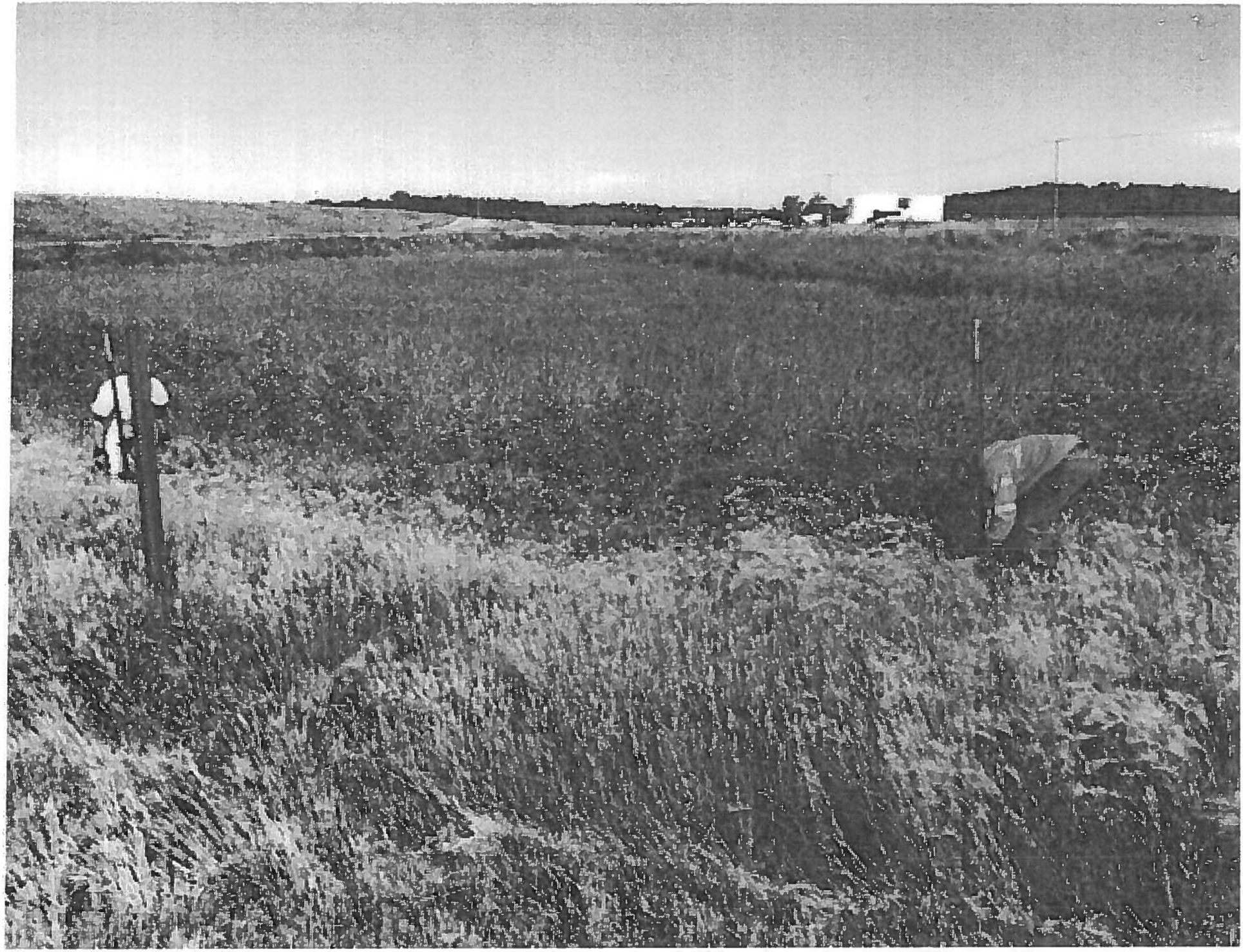
Attendee's Name (Print)	Supervisor	Cost Center	Signature
Jim DeBrecht	Kevan Heil	200	Jim DeBrecht
Mark Halsell	Tim Powers	398	Mark Halsell
MICHAEL OSWALD	TIM POWERS	2505	
ROD DAYLOR	TIM POWERS	5204	Rod Daylor
Kevin Whitbeck	Kevan Heil	200	Kevin Whitbeck
CARL CHANDLER	KEVAN HEIL	5200	Carl Chandler
James Templeton	Kevan Heil	5935	James Templeton
HENRY HENDERSON	Jon Jacobs	5277	Henry Henderson
John Mentzel	Jon Jacobs	5222	John Mentzel
Bryan Cosby	James Slatter	5550	Bryan Cosby
Tyler Kraus	Mark Lepich	5810	Tyler Kraus
CHARLES BEVER	MATT ARCHER	5810	Charles Bever
BOB HEESE	MATT ARCHER	5810	Bob Heese
Les Spence	Jon Jacobs	5560	Les Spence
Tim Lubbers	TARR	5002	Tim Lubbers
Brandon Stark	Tarr	5002	Brandon Stark

I certify that the above participants attended and completed training on the topic listed.

Instructor Signature: Atiya Stverson

Instructor 2 Signature: _____


St Joseph
Troy



Month: June-Oct 2014

MAGELLAN MIDSTREAM PARTNERS, L.P.

See Magellan Procedure MONTHLY EXTERNAL TANK INSPECTION for instructions.

Tank	Section 1- Inspection	Were leaks identified on the shell of the tank or tank appurtenances? Results		Does the tank shell show signs of a new (undocumented) distortion or a change in severity of an existing (documented) distortion? Results		Does the tank show signs of new (undocumented) settlement or a change in severity of an existing (documented) settlement issue? Results		Were unmitigated corrosion pits identified on the tank shell or tank appurtenances? Results		Section 2- General Condition	Note the general condition of the tank foundation Results		Note the general condition of paint coatings and/or insulation Results		Note the general condition of tank appurtenances. Results		Inspected By	Date of Inspection	Following the review of this inspection by the local Operations Supervisor, notify the Tank Integrity Specialist when discrepancies are identified and documented per the Monthly External Tank Inspection Procedure.
		Yes	No	Yes	No	Yes	No	Yes	No		Adequate	Inadequate	Adequate	Inadequate	Adequate	Inadequate	Initials	Date	Comments
Tank #760			X		X		X		X		X		X		X		HLH	6/30/2014	
Tank #1431					X		X		X		X		X		X		HLH	6/30/2014	Temp Out of Service for API 653
Tank #313			X		X		X		X		X		X		X		HLH	6/30/2014	
Tank #070			x		x		x		x		x		x		x		HLH	6/30/2014	
Tank #130			x		x		x		x		x		x		x		HLH	6/30/2014	Ivd Out of Service
Tank #132			x		x		x		x		x		x		x		HLH	6/30/2014	
Tank #133			x		x		x		x		x		x		x		HLH	6/30/2014	
Tank #160			x		x		x		x		x		x		x		HLH	6/30/2014	
Tank #																			
Tank #760																			
Tank #1431																			
Ta[illegible]313																			
T[illegible]70																			
Ta[illegible]130																			
Tank #132																			
Tank #133																			
Tank #160																			
Tank #																			
Tank #760																			
Tank #1431																			
Tank #313																			
Tank #070																			
Tank #130																			
Tank #132																			
Tank #133																			
Tank #160																			
Tank #																			
Tank #760																			
Tank #1431																			
Tank #313																			
Tank #070																			
Tank #130																			
Tank #132																			
Tank #133																			
Tank #160																			
Tank #																			
Tank #760																			
Tank #1431																			
Tank #313																			
Tank #070																			
Tank #130																			
Tank #132																			
Tank #133																			
Tank #160																			
Tank #																			

D[illegible]tion: Location File System
R[illegible]on: 2 years plus current Inspection

Highlighted areas above denote a discrepancy.

Location: Wathena 5277

Month: Jan tru May

MAGELLAN MIDSTREAM PARTNERS, L.P.

See Magellan Procedure MONTHLY EXTERNAL TANK INSPECTION for instructions.

	Section 1- Inspection									Section 2- General Condition										
		Were leaks identified on the shell of the tank or tank appurtenances?		Does the tank shell show signs of a new (undocumented) distortion or a change in severity of an existing (documented) distortion?		Does the tank show signs of new (undocumented) settlement or a change in severity of an existing (documented) settlement issue?		Were unmitigated corrosion pits identified on the tank shell or tank appurtenances?			Note the general condition of the tank foundation		Note the general condition of paint coatings and/or insulation		Note the general condition of tank appurtenances.		Inspected By	Date of Inspection	Following the review of this inspection by the local Operations Supervisor, notify the Tank Integrity Specialist when discrepancies are identified and documented per the Monthly External Tank Inspection Procedure.
		Results		Results		Results		Results			Results		Results		Results				
Tank		Yes	No	Yes	No	Yes	No	Yes	No		Adequate	Inadequate	Adequate	Inadequate	Adequate	Inadequate	Initials	Date	*Comments*
Tank #760			X		X		X		X		X		X		X		HLH	1/30/2014	
Tank #1431			X		X		X		X		X		X		X		HLH	1/30/2014	
Tank #313			X		X		X		X		X		X		X		HLH	1/30/2014	
Tank #070			X		X		X		X		X		X		X		HLH	1/30/2014	
Tank #130			X		X		X		X		X		X		X		HLH	1/30/2014	
Tank #132			X		X		X		X		X		X		X		HLH	1/30/2014	
Tank #133			X		X		X		X		X		X		X		HLH	1/30/2014	
Tank #160			X		X		X		X		X		X		X		HLH	1/30/2014	
Tank #																			
Tank #760			X		X		X		X		X		X		X		HLH	2/24/2014	
Tank #1431			X		X		X		X		X		X		X		HLH	2/24/2014	
T 13			X		X		X		X		X		X		X		HLH	2/24/2014	
T .70			X		X		X		X		X		X		X		HLH	2/24/2014	
Tank #130			X		X		X		X		X		X		X		HLH	2/24/2014	
Tank #132			X		X		X		X		X		X		X		HLH	2/24/2014	
Tank #133			X		X		X		X		X		X		X		HLH	2/24/2014	
Tank #160			X		X		X		X		X		X		X		HLH	2/24/2014	
Tank #																			
Tank #760			X		X		X		X		X		X		X		ORW	3/28/2014	
Tank #1431			X		X		X		X		X		X		X		ORW	3/28/2014	
Tank #313			X		X		X		X		X		X		X		ORW	3/28/2014	
Tank #070			X		X		X		X		X		X		X		ORW	3/28/2014	
Tank #130			X		X		X		X		X		X		X		ORW	3/28/2014	
Tank #132			X		X		X		X		X		X		X		ORW	3/28/2014	
Tank #133			X		X		X		X		X		X		X		ORW	3/28/2014	
Tank #160			X		X		X		X		X		X		X		ORW	3/28/2014	
Tank #																			
Tank #760			X		X		X		X		X		X		X		ORW	4/24/2014	
Tank #1431					X		X		X		X		X		X		ORW	4/24/2014	Out of Service for API 653
Tank #313					X		X		X		X		X		X		ORW	4/24/2014	Out of Service for API 653
Tank #070			X		X		X		X		X		X		X		ORW	4/24/2014	
Tank #130			X		X		X		X		X		X		X		ORW	4/24/2014	Out of Service
Tank #132			X		X		X		X		X		X		X		ORW	4/24/2014	
Tank #133			X		X		X		X		X		X		X		ORW	4/24/2014	
Tank #160			X		X		X		X		X		X		X		ORW	4/24/2014	
Tank #																			
Tank #760			X		X		X		X		X		X		X		ORW	5/30/2014	
Tank #1431					X		X		X		X		X		X		ORW	5/30/2014	Temp Out of Service for API 653
Tank #313			X		X		X		X		X		X		X		ORW	5/30/2014	
Tank #070			X		X		X		X		X		X		X		ORW	5/30/2014	
Tank #130			X		X		X		X		X		X		X		ORW	5/30/2014	lvd Out of Service
Tank #132			X		X		X		X		X		X		X		ORW	5/30/2014	
Tank #133			X		X		X		X		X		X		X		ORW	5/30/2014	
Tank #160			X		X		X		X		X		X		X		ORW	5/30/2014	
Tank #																			

D tion: Location File System

R m: 2 years plus current Inspection

Monthly Ext Tank Inspection Template Discrepancy.

A. General Information (complete or check all spaces that are applicable)

Date: 6/13/2014	Name Of Person Completing Form: Jon Jacobs
District/Area: MWD	Location Of Exercise: St Joe Terminal
Semiannual Terminal Equipment Deployment? ☒ 1st Semiannual	☐ 2nd Semiannual
Annual Pipeline Equipment Deployment ☐	
Announced ☒	Unannounced ☐
Gov't Initiated ☐	Actual Response ☐

B. Instructions

When to use this form

1. Use this form for:
   - **a.** Terminal Equipment Deployment Exercises
   - **b.** Pipeline Equipment Deployment Exercises
   - **c.** Government Initiated Unannounced Exercises
   - **d.** Responses to Actual Emergencies
   - **e.** Response Equipment Inspections

Application

1. The requirement to deploy response equipment applies to terminals with Integrated Contingency Plans and Pipelines that have response equipment in storage.
2. There are three types of terminals for purposes of this form. The first type of terminal has its own containment boom. The second type has no containment boom, but has other equipment such as culvert plugs or plugging equipment such as sandbags and plywood. The third type of terminal has no response equipment except for sorbent boom, pads and hand tools.

Exercise requirements (See district implementation plan)

1. Terminals with Company owned response equipment (i.e. containment boom):
   - a. The terminal shall conduct Equipment Deployment Exercises twice each year, one of which will be unannounced.
   - b. The amount of equipment to deploy shall be the equipment necessary to respond to a small, 2,100 gallon, off-site discharge.
   - c. All other response equipment shall be inspected and documented on this form
2. Terminals with some response equipment (i.e., culvert blocking equipment) that rely on OSROs to respond with containment boom:
   - a. Terminals shall conduct Equipment Deployment Exercises twice each year, one of which will be unannounced.
   - b. Any response equipment not used shall be inspected and documented on this form
   - c. On a yearly basis, Terminals should ensure that the OSRO designated in their response plan is capable of properly responding to the tactical sites identified in the response plan.
3. Terminals with no response equipment other than shovels and adsorbent pads.
   - a. Any response equipment not used shall be inspected and documented on this form
   - b. On a yearly basis, Terminals should ensure that the OSRO designated in their response plan is capable of properly responding to the tactical sites identified in the response plan.
4. Pipeline Response Equipment
   - a. For each cache of response equipment, a representative sample should be deployed once each year by the personnel expected to deploy the equipment; either Company personnel or OSRO contractors.
   - b. Any response equipment not used shall be inspected and documented on this form.

Distribution: Facility and District/Area Office
Retention: 5 Years

EXERCISE PREPARATION

1. The QI should function as the Exercise Coordinator and/or Exercise Evaluator. The QI should:
   a. Review the PREP ICP/PRP Core Components Checklist (Appendix A) prior to initiating any exercise in order to develop and communicate exercise objectives. The exercise must be designed to address all of the items identified in the Checklist.
   b. Plan the exercise scenario – preferably using a site that is off facility property and at the nearest instance of navigable water Equipment deployment should be at an actual tactical site identified in the Integrated Contingency Plan, Pipeline Response Plan, or at a similar site.
   c. Exercise coordinators are encouraged to include response contractors and local emergency response agencies (listed in the Integrated Contingency Plan) in the equipment deployment exercises. Participation of outside agencies should be documented on this form.
   d. Ensure that each exercise includes a *tabletop discussion* of the selected scenario utilizing the Integrated Contingency Plan and/or the Pipeline Response Plan. Ideally, the tabletop discussion would precede or occur along with the equipment deployment exercise.
   e. Identify and communicate exercise objectives to participants
2. An unannounced exercise consists of an event where the participants do not know the location, time, or scenario in advance of the exercise.
3. In addition to SIP Element 12, refer to SIP Element 16 for acronyms and to SIP Element 17 for definitions.

EQUIPMENT DEPLOYMENT INSTRUCTIONS

1. Supervisors shall ensure the proper PPE is provided for Company personnel deploying response equipment.
2. For Terminals where the sole OSRO resource for small/med spill containment and recovery is a contractor, the QI will evaluate the contractor's performance by recording the contractor notification time, and then the following:
   - Time at which containment boom or other approved containment action is deployed and functional. The maximum allowable elapsed time for this activity is 1 hour from time of contractor notification.
   - Time at which oil recovery equipment is available. The maximum allowable elapsed time for this activity is 2 hours from time of contractor notification.
3. The QI shall certify the exercise or response using this form.
   - Critique and documentation of the exercise on this form and on Appendix A, the PREP ICP/PRP Core Components Checklist.
   - Capturing necessary action items to address inadequacies of the response or of the response plan.
   - Completion and distribution of this form to file within 30 days following completion of the exercise.

NOTE: DEPLOYMENT REFERS TO ACTUAL MOBILIZATION AND "USE AS INTENDED" FOR ALL EQUIPMENT THAT IS LISTED FOR EACH FACILITY OR CACHE IN THE DISTRICT IMPLEMENTATION PLAN. THIS EXERCISE CAN BE ANNOUNCED OR UNANNOUNCED.

C. EXERCISE INFORMATION (PROVIDE INFORMATION BELOW IF APPLICABLE, OR MARK N/A)		
PIPELINE NAME:	MILEPOST (OR OTHER REFERENCE):	
TERMINAL NAME: **ST JOE TERMINAL**	TACTICAL SITE: **#1**	
WATER BODY: **STORM WATER RUN OFF POND**	EQUIPMENT CACHE:**BOOM DEPLOYMENT/CULVERT BLOCKING**	
EXERCISE DATE: **6/13/2014**	BEGIN TIME: **09:28**	END TIME: **10:02**

FOR TERMINAL EQUIPMENT DEPLOYMENT EXERCISES ONLY.

DOES A CONTRACTOR DEPLOY EQUIPMENT AND PERSONNEL IN ORDER TO FULFILL THE SMALL/MED SPILL CONTAINMENT/RECOVERY REQUIREMENTS OF 40 CFR 112 APPENDIX E (1 HOUR CONTAINMENT; 2 HR RECOVERY) FOR THE TERMINAL? ☒ YES ☐ NO

- IF YES, THEN STOP HERE AND PROCEED TO BLOCK F; OTHERWISE, CONTINUE TO COMPLETE BLOCKS D AND E BELOW.

FOR PIPELINE EQUIPMENT DEPLOYMENT EXERCISES ONLY.

IN THE EVENT OF AN EMERGENCY, WILL A CONTRACTOR BE EXPECTED TO DEPLOY EQUIPMENT FROM THE PIPELINE EQUIPMENT CACHE IN LIEU OF COMPANY PERSONNEL? ☐ YES ☐ NO

- IF YES, THEN CONTINUE TO COMPLETE BLOCKS D AND E BELOW AND THEN PROCEED TO BLOCK F.
- IF NO, THEN CONTINUE TO COMPLETE BLOCKS D AND E BELOW AND THEN PROCEED DIRECTLY BLOCK G.

D. Response Description

Provide a Detailed Description of the Scenario and Exercise (or Actual) Response. Use Sketches and Diagrams as Appropriate:

DEPLOYMENT OF ROUGHLY 50' OF CONTAINMENT BOOM ON WATER AS SPECIFIED BY THE EPA APPROXIMATELY 1/8 MILE SE OF ST JOE TERMINAL AS OUTLINED IN SMALL SPILL SCENARIO; TACTICAL SITE #1.

CULVERT BLOCKING UTILIZING SAND BAGS AND PLASTIC MATERIAL

ST JOE TERMINAL STAFF MEMBERS UTILIZED NOTIFICATION PROCESS PER MAGELLAN'S SPILL REPORTING NUMBER.

CHECKED GENERATOR FOR OPERABILITY.

DEPLOYED/INSPECTED EQUIPMENT LIST

DEPLOYED	INSPECTED	QTY	DESCRIPTION	SIZE/ CAPACITY	CONDITION G= GOOD N= NEEDS REPAIR OR REPLACE	SHELF LIFE	LOCATION
X		50'	Acme mini containment boom	4" by 6"	G	N/A	Trailer
X			Sand bags		G	NA	Garage
X			Visqueen tarp	3'x3'	G	N/A	Trailer
X			PFD's		G	N/A	Trailer
X			Air Monitor		G	N/A	Location
X			Shovels		G	N/A	Trailer
X			T-post		G	N/A	Trailer
X		25'	Rope		G	N/A	Trailer
X			Genrator		G	N/A	Trailer
X			Light Standard		G	N/A	Trailer

F. Oil Spill Removal Organizations:

OSRO Name(S):

OSRO Callout Time:	OSRO Arrival Time:

Provide a List of the Equipment and Personnel OSRO Provided, Company Owned Equipment That OSRO Deployed on Behalf of The Company, or a Brief Description of the Activities Undertaken By The OSRO:

N/A for announced Drills

Overall, Was the OSRO Response and Equipment Deployment Adequate?

☐ Yes ☒ No -, List Suggestions For Improvement In QI Comments Section

Is OSRO Information Listed Correctly in Response Plans?

☒ Yes ☐ No - Provide Correct Information in QI Comments Section

Distribution: Facility and District/Area Office
Retention: 5 Years

G. QI Certification Page

Were Deficiencies Identified During This Exercise/Event?

☒ No ☐ Yes -List All Deficiencies in Comments Section.

Have deficiences been corrected?

☒ N/A - No deficiencies identified

☐ Yes – changes have been implemented

☐ In Progress - changes have been communicated to the appropriate Manager of Operations, Entered in the Online Action Item Tracking Database and Flagged For Follow Up Within 30 Days.

Are There Other Attachments To This Form? ☐ No ☒ Yes - List Below In Comments Section)

QI Comments:

Pictures Attached.

Certification: In Order to Be Valid, This Form Must Bear The Original Signature of a Listed QI

Name (Print): Jon Jacobs

Signature: [signature]

Date: 6/16/14

Distribution: Facility and District/Area Office
Retention: 5 Years

APPENDIX A

PREP ICP/PRP CORE COMPONENT PLANNING/EVALUATION CHECKLIST

NOTE: USE THIS CHECKLIST FOR PLANNING EXERCISE OBJECTIVES AND AFTER CONDUCTING AN EQUIPMENT DEPLOYMENT EXERCISE OR RESPONDING TO AN ACTUAL EVENT. ALL OF THE QUESTIONS MUST BE ADDRESSED FOR EQUIPMENT DEPLOYMENT EXERCISES OR ACTUAL RESPONSES IN ORDER TO CERTIFY THE EVENT. IF A "NO" BOX IS CHECKED, AN ACCOMPANYING COMMENT SHOULD BE ENTERED IN THE "QI COMMENTS" SECTION. IF THE QUESTION IS "N/A", THEN CHECK "NO" AND PROVIDE JUSTIFICATION IN THE "QI COMMENTS" SECTION.

	Yes	No	
ORGANIZATIONAL DESIGN			
1.	☒	☐	Were internal and external **notifications** made as required in the ICP/PRP?
2.	☒	☐	Did the necessary **Company/Contractor staff mobilize** as required?
3.	☒	☐	Was the **ICS/UCS** organization deployed smoothly and adhered to during the exercise or event?
4.	☒	☐	Did all participants know their roles, and did they understand what was expected of them?
OPERATIONAL RESPONSE			
5.	☒	☐	Were the Integrated Contingency Plan and/or Pipeline Response Plan utilized?
6.	☒	☐	Was the discharge source identified and secured in a timely manner?
7.	☒	☐	Was the discharge area sized-up, wind direction and potential impacts assessed accurately?
8.	☒	☐	Were protective actions (PPE, work zones, air monitoring etc.) applied appropriately?
9.	☒	☐	Were zones, corridors, and evacuation routes established?
10.	☒	☐	Was a short-term action plan developed?
11.	☒	☐	Was terminal spill containment equipment deployed within **1 hour**?
12.	☐	☒	Was pipeline spill containment equipment deployed timely and effectively?
13.	☒	☐	Was terminal spill recovery equipment deployed (or available) within **2 hours**?
14.	☐	☒	Was pipeline spill recovery equipment deployed timely and effectively?
15.	☒	☐	Was the Area Contingency Plan (if applicable) reviewed to identify sensitivities?
16.	☒	☐	Was protective booming discussed or used to protect water intakes?
17.	☒	☐	Were population and wildlife protection, and wildlife rehabilitation considered?
18.	☒	☐	Were long-term action plans developed to protect sensitive locations identified in the ICP/ACP?
19.	☒	☐	Were storage and disposal of recovered material and contaminated debris considered?
RESPONSE SUPPORT			
20.	☒	☐	Were emergency communications, internal and external, effective?
21.	☒	☐	Was transportation of personnel and equipment safe and expedient (land and waterborne)?
22.	☒	☐	Was support staff available and adequate as expected?
23.	☒	☐	Would berthing, messing, and emergency services be readily available if this were a large spill?
24.	☒	☐	Was the equipment used adequately maintained and in good condition?
25.	☐	☒	Was additional equipment procured by support staff in a timely manner?
26.	☒	☐	Was a participant debriefing and post incident evaluation conducted?
27.	☒	☐	Was all emergency-phase documentation gathered and secured?

Distribution: Facility and District/Area Office
Retention: 5 Years

APPENDIX B

ATTENDANCE

PREP EXERCISE/EMERGENCY RESPONSE PARTICIPANTS		
NAME	AFFILIATION	PHONE
Kenny Allen	MPL	(785) 989.3448
Owen Worstell	MPL	(785) 989.3448
Les Spence	MPL	(816) 377.3225

Distribution: Facility and District/Area Office
Retention: 5 Years

System Integrity Plan Change Log

Date	Change Location	Brief Description of Change
01/01/10	Section B, Line 7	Updated SIP Element numbering
1/1/2011	Section B	Simplified Instructions
1/1/2011	Section E	Inserted an equipment list to cover deployments and inspections.
12/31/11	All	2012 Annual Review complete – no changes
12/31/12	All	2013 annual review complete, no changes
12/31/2013	All	2014 SIP annual review completed, no changes

Attachment 7

ICIS Form

REGION 7 - FRP - EPA INSPECTION CONCLUSION DATA SHEET (ICDS) 2006 Form

* **Data elements required to be completed for ICIS system data entry**
Data elements that do not have asterisks are *optional*

Inspectors Name: Eric Nold **Phone No.:** 913-551-7488

1. ***Compliance Activity Type:** Compliance Inspection ***Date Report Sent to Facility:** ?/?/2014

1. ***Compliance Monitoring Activity Name:** Magellan St. Joseph Terminal

2. ***Compliance Monitoring Type:** CWA Section 311 FRP Inspection/Exercise

4. *** Region** 7 **ID Number:** FRP07A023

5. ***Facility Name:** Magellan Pipeline Company St. Joseph (Wathena) Terminal

***Street Address:** 963 Vermont Road

***City, State, Zip:** Wathena, KS 66090

6. - 9. *** Date of Inspection: Begin:** 7/21/2014 **End:** 7/21/2014

10. ***Federal Statutes:** _X_ **CWA**

11. ***Sections:** _X_ **CWA 311 Oil and Hazardous Substance Liability SPCC/FRP**

12 *** Citations:** *check citation of* **40 CFR** *that was inspected:* _X_ **Part 112**

13. *** Programs**: No entry needed. This data element is automatically populated by the ICIS data system based on the information provided in items #10 and #11.

14. *** SIC (4-digit: ____ ____ ____ ____** or **NAICS Code (6-digit):** 486910

15. **Media Monitored:** *Check one of the following:* __X_Water (surface) ____Water (stormwater)

16. *** Compliance Monitoring Action Reason:** *(Circle one of the following)*
Agency Priority
Citizen Complaint/Tip Core Program Selected Monitoring Action Random Evaluation or Inspection

17. *** Compliance Monitoring Agency Type:** **EPA**

18. - 20. Does not apply

21. **Compliance Monitoring Action Outcome:** *Check one (if known at the time of the activity):*

____ Administrative ____ Immediately corrected ____ Judicial __X_ No violation
____No compliance monitoring (access denied) ____ No compliance monitoring (facility shutdown)
____Not immediately corrected ____ Notice of Determination ____ Under review ____ Withdrawn

22. - 23. Does not apply to this program

24. ****Did you observe deficiencies (potential violations) during the on-site inspection?** ❒ Yes X No
N/A cannot be a response. If the answer is no, go straight to #28.

25. ****If you observed deficiencies, did you communicate them to facility during the inspection?** ❒ Yes ❒ No
N/A cannot be a response.

26. ****Deficiencies Observed:**
Check one or more of the following:
_____Potential violation of a compliance schedule in an enforceable order
_____Potential failure to maintain a record or failure to disclose a document **(Inadequate Records)**
_____Potential failure to maintain, inspect or repair equipment including meters, sensors, and recording equipment
_____Potential failure to complete or submit a notification, report, certification, or manifest

_____Potential failure to obtain a permit, product approval, or certification **(No FRP Plan)**

_____Potential failure to follow a required sampling or monitoring procedure or laboratory procedure

_____Potential failure to follow or develop a required management practice or procedure **(Deficient Plan, Inadequate Plan Implementation, Inadequate or No Training, No Response Equipment, No Exercise Program, Inadequate or No Documentation; Out of Date Plan)**

_____Potential failure to identify and manage a regulated waste or pollutant in any media

_____Potential failure to report regulated events such as spills, accidents, etc.

_____Potential incorrect use of a material (e.g., pesticide, waste, product, etc.)or use of improper or unapproved material **(Incompatible Tank Materials)**

_____Potential failure to follow a permit condition (s) **(Inadequate or No Security, Unsecured Valves)**

_____Potential excess emission in violation of a regulation **(Inadequate or No Containment)**

27. **Did you observe or see the facility take any actions during the inspection to address the deficiencies communicated to the facility? ☐ Yes ■ No

If YES, check only the action(s) actually observed/seen or write in a short description of the action in the "optional" section. *(Check all that apply)*

Action(s) taken

_____Complete(d) a Notification or Report

_____Correct(ed) Monitoring Deficiencies

_____Correct(ed) Record Keeping Deficiencies

_____Implemented New or Improved Management Practices or Procedures

_____Improved Pollutant Identification (e.g., Labeling, Manifesting, Storage, etc.)

_____Reduced Pollution (e.g., Use Reduction, Industrial Process Change, Emissions or Discharge Change, etc.)

_____Request(ed) a Permit Application or Applied for a Permit

_____Verify (ied) Compliance with Previously Issued Enforcement Action - Part or All Conditions

28. Did you provide general compliance assistance in accordance with the policy on the Role of the EPA Inspector in Providing Compliance Assistance During Inspections? ■ Yes ☐ No

29. Did you provide site-specific compliance assistance in accordance with the policy on the Role of the EPA Inspector in Providing Compliance Assistance During Inspections? ■ Yes ☐ No

Note: This form does **not** require EPA inspectors to provide compliance assistance.

Optional Information: Describe actions taken by the facility or assistance provided to the facility: Reviewed and commented on incorrect planning volume scenario which was changed correctly. Reviewed and commented on tactical response locations and strategies to be exercised by facility personnel. Site inspection was successful. FRP plan is acceptable. Facility is in full compliance.

For Data Entry Staff Use Only:

30. Date and initials of person entering data into ICIS (mm/dd/yyyy):_____

The main purpose of EPA inspections/evaluations is to determine compliance with environmental regulations and enforcement agreements. Secondary purposes include providing a field presence to create a credible deterrent and providing assistance, when appropriate, to help facilities achieve compliance.

- The ICDS is designed to identify readily observable corrections to deficiencies and compliance assistance activities. ICDS is NOT designed to capture ALL of the observations, findings, and other data contained in the final inspection report. **Deficiencies identified as potential violations, and actions to address deficiencies noted on the ICDS must be included in the final inspection/evaluation report.**
- ICDS information will be used to collect accomplishments of EPA's national inspection/evaluation efforts, develop outcomes for GPRA, and manage national compliance monitoring resources.
- The information will NOT be used to track individual EPA inspector's performance.
- The ICDS should **only** be used for EPA-led inspections or evaluations, not for state oversight inspections.

Instructions for Each Question:

1. **Compliance Activity Type:** EPA inspectors should only enter compliance inspection. This choice includes Clean Air Act Full Compliance Evaluations (FCEs) and Partial Compliance Evaluations (PCEs)

2. **Compliance Monitoring Activity Name:** Enter the actual name of the facility inspected/evaluated

3. **Compliance Monitoring Type:** There are a number of choices listed in alphabetical order by statute. Circle the appropriate choice pertaining to the type of inspection or evaluation conducted. Circle only **one choice**.

4. **Region:** Enter the EPA region associated with the inspection/evaluation.

5. **Facilities:** Enter the facility name. If the facility is in FRS, it will automatically populate when you enter sufficient information. If the facility is not in FRS, the person that enters the data into ICIS will have to create a new facility to link to FRS.

6. **Planned Start Date of Inspection:** Enter the planned start of the inspection/evaluation

7. **Planned End Date of Inspection:** Enter the planned end date of the inspection/evaluation

8. **Actual Start Date of Inspection:** Enter the actual start date of the inspection/evaluation

9. **Actual End Date of Inspection:** Enter the actual end date of the inspection/evaluation

10. **Federal Statutes:** Check only one of the statutes listed that applies to the inspection/evaluation being conducted.

11. **Sections:** Enter the section(s) of law(s) that authorize the compliance inspection/evaluation. NOTE: When selecting a statute from the previous data element, ICIS provides a pull down list of the statutory sections available for that statute.

12. **Citations:** Enter the regulatory citations that were inspected or evaluated during the on-site activity.

13. **Programs:** This data element is automatically generated by ICIS when completing items #10 and #11.

14. **SIC/NAICS Codes:** Identify the code corresponding to the facility. Guidance on how to identify SIC or NAICS codes can be downloaded at (http://www.doc.gov), CD-rom (PB98-502024) by calling NTIS (800-553-6847), or Inspector Website (**http://intranet.epa.gov.oeca/oc/metd/inspector).**

15. **Media Monitored:** Do not complete

16. **Compliance Monitoring Action Reason:** Check only one of the five (5) reasons for performing the inspection/evaluation.

17. **Compliance Monitoring Agency Type:** EPA. is the only choice that should be entered

18. Do not complete

19. Do not complete
20. Do not complete

21. **Compliance Monitoring Action Outcome:** Check *one* of the outcomes associated with the inspection/evaluation (if known at the time of the inspection or evaluation)

22. **MOA Priorities:** Priorities determined by HQ and supported in Region 7

23. **Regional Priorities:** Not reported on this form in Region 7

24. **Did you Observe Deficiencies:** Check YES or NO.

25. **Communicating Deficiencies:** If Yes to question #24, did you communicate the deficiencies to the facility? Check YES or NO. EPA inspectors should follow the Regional policy on when and how to inform facilities of deficiencies. Deficiencies are defined as readily observable violations of statues, permits, or regulations. Deficiencies are NOT compliance determinations (further review by a compliance officer or attorney is needed to determine actual violations).

26. **Deficiencies Observed:** Check one of more of the eleven (12) choices.

27. **Actions Taken:** Check YES if you observed the facility taking actions. Check only the action(s) actually observed/seen, or write a short description of the action in the "Optional" section. These are *not* compliance determinations. **If the Reduced Pollution Box is checked, specify the pollutant(s):** *Other -- any pollutant besides listed below. Ammonia* - NH3-N, ammonia nitrogen, ammonia as N, *BOD*-Biochemical Oxygen Demand, *COD*- Chemical Oxygen Demand, *TC*-Total Coliform, *TSS*- Total Suspended Solids, SS, Settleable solids, *O/G*- Oil and Grease, *DO*- Dissolved Oxygen, *NOx*- Nitrogen Oxides, *SO2*- Sulphur Dioxide, *PM*- Particulate Matter, *VOC*- Volatile Organic Compound, *CN*- Cyanide, *HAPs* - Hazardous Air Pollutants, *CO*- Carbon Monoxide, *Metals*- Hexavalent Chromium, Lead, Mercury, etc. You can write in other pollutants if not listed. The Case Conclusion Data Sheet Training Booklet [November, 2000] provides additional information on actions taken. The Training Booklet It can be obtained by calling the Office of Compliance at 202-564-6004.

28. **General Compliance Assistance:** Check YES if the EPA inspector provided general compliance assistance during the inspection or evaluation. Inspectors are **not** required to provide compliance assistance during inspections. General compliance assistance includes distributing or sharing information on industry regulatory compliance, pollution prevention, or technical written assistance materials or websites and EPA, state and local assistance programs.

29. **Site-Specific Compliance Assistance:** Check YES if the EPA inspector provided site-specific compliance assistance during the inspection or evaluation. Inspectors are **not** required to provide compliance assistance during inspections. Site-specific compliance assistance is defined in the National Policy on the Role of the EPA Inspector in Providing Compliance Assistance During Inspections, dated June 25, 2003.

Data Collection Process:

➔ Inspectors should complete the ICDS form *immediately* after the inspection or evaluation is completed.

➔ Completed forms should be forwarded to the first-line supervisor or designated alternate within five (5) days after returning from either a single inspection/evaluation or a series of inspections/evaluations.

➔The first-line supervisor or designated alternate **must** review the ICDS for completeness and accuracy.

➔After review, the first line supervisor or designated alternate **must** forward the forms to Pam Johnson for entry into ICIS.

➔Central data personnel enter the ICDS data into ICIS following the instructions provided.

Attachment 8

Facility Inspection Transmittal Letter

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 7
11201 Renner Boulevard
Lenexa, Kansas 66219

NOV 18 2014

Mr. Richard Bondy
Emergency Response and Preparedness Coordinator
Magellan Midstream Holdings GP, LLC
One Williams Center, MD 27-2
Tulsa, Oklahoma 74172

Re: Magellan St. Joseph Terminal
Wathena, Kansas
FRP07A023

Dear Mr. Bondy:

On July 21, 2014, the above-referenced facility was inspected under the authority of Section 308 of the Clean Water Act, 33 U.S.C. § 1318 and in accordance with the Facility Response Plan (FRP) requirements of 40 CFR Part 112.

The inspection determined that the FRP's assessment of the facility's small, medium, and worst-case discharge scenarios is accurate and appropriate. Terminal personnel demonstrated proper training and knowledge of emergency actions to be taken in the event of a release. A review of the facility's tactical response strategies determined that the facility's planned response actions are appropriate, implementable and can be effective in controlling a release until additional response resources are mobilized. Facility training, exercise, and inspection documentation was reviewed and found to be well maintained and complete.

A copy of our FRP Inspection Checklist is enclosed for your information.

In conjunction with the inspection, a review of the FRP was conducted and after suggested changes were made and received via the e-mail dated September 4, 2014, no deficiencies were noted. It is our determination that the St. Joseph Terminal is currently in full compliance with the applicable Facility Response Planning statutes and regulations. If it is subsequently determined that violations exist, EPA reserves all rights it may have to take appropriate enforcement action.

If there are any questions regarding the above, please contact me at (913) 551-7488 or by email at nold.eric@epa.gov.

Thank you for your cooperation in this matter.

Sincerely,

Eric Nold
On-Scene Coordinator
Planning and Preparedness South Section
Emergency Response South Branch
Superfund Division